04/21/2006 17:22

Image# 26960080727

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

	1017117	authorized o				Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR F		Example:If to over the line	yping, type es		
Graves for Congress	<u> </u>		1 1 1 1			
		1 1 1 1				
ADDRESS (number and street)	2345 Grand	d, Suite 2400				
Check if different than previously reported. (ACC)	Kansas City	/			MO	64,108
2. FEC IDENTIFICATION NU	MBER ₩	CITY	(A		STATE	ZIP CODE 🛕
C00359034		3. IS THI REPO		NEW (N) OR	X AMEN (A)	STATE V DISTRICT
4. TYPE OF REPORT (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quart X January 31 Year-	Report (Q2) erly Report (Q3)	Electio	Prima Conve	n Report for the: ry (12P) ention (12C) on Report for the ral (30G)	General	in the State of
Termination Repo	ort (TER)	Electio	on on			in the State of
5. Covering Period 1	0 0 1	2005	thr	ough 1	2 31	2005
I certify that I have examined this Type or Print Name of Treasure		best of my know Paul Bradshav	•	ief it is true, cor	rect and complete	
	ronically Filed by	Jean Paul B		ne person signin	Date 0 4	2 1 2 0 0 6 e penalties of 2 U.S.C 437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 26960080728

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name **Graves for Congress** м N 12 ° D 1 0 0 1 2005 2005 Report Covering the Period: From: To: 3 1 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 128353.00 592345.00 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 128353.00 592345.00 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 80293.18 383657.51 (from Line 17)..... (b) Total Offsets to Operating 5872.54 133070.43 Expenditures (from Line 14)..... (c) Net Operating Expenditures 74420.64 250587.08 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 405192.63 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 2644.65 Schedule C and/or Schedule D)..... For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name **Graves for Congress** ° D 2005 12 2005 From: 10 0 1 Report Covering the Period: To: 3 1 **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 40180.00 272372.00 (i) Itemized (use Schedule A)..... 8585.00 8585.00 (ii) Unitemized..... (iii) TOTAL of contributions 48765.00 280957.00 from individuals..... 588.00 963.00 (b) Political Party Committees..... (c) Other Political Committees 79000.00 310425.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 128353.00 592345.00 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 5872.54 133070.43 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 19.35 115.96 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 725531.39 134244.89

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	80293.18	383657.51
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed		
	by the Candidate	0.00	0.00
	(b) Of all Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	59315.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	80293.18	442972.51
	III. CASH SUMMA	ARY	
23.	CASH ON HAND AT BEGINNING OF REPORTING	PERIOD	351240.92
24.	TOTAL RECEIPTS THIS PERIOD (from Line 16, page	ge3)	134244.89
25.	SUBTOTAL (add Line 23 and Line 24)		485485.81
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line	9 22)	80293.18
27.	CASH ON HAND AT CLOSE OF REPORTING PER (subtract Line 26 from Line 25)		405192.63

FE3AN044

FEC FORM 3Z-1 (File with Form 3)

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19) (Millionaires' Amendment)

	Name of Candidate				Candidate ID Number
	Sam Graves			L	H0MO06073
	Name of Principal Campaign Com	nmittee			Committee ID Number
	Graves for Congress				C C00359034
	Committee Address 2345 Grand, Suite 2400				
	City St	ate	ZIP		
	Kansas City N	10	64108-		
	Report Covering Period (check one		through June 30, or x the preceding the year of the gen	-	ember 31 of the year n General
1.	Gross receipts of authorized committees		583454.18		142077.21
2.	Aggregate amount of contributions from personal funds of the candidate		0.00		0.00
3.	. Gross receipts minus the candidate's personal contributions		583454.18		142077.21

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 105 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements may be name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
۸.	Full Name (Last, First, Middle Initial) Bayer Corporation PAC Mailing Address 1275 Pennsylvania A Suite 801 City	ve., NW	Zip Code	Date of Receipt M
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	C	n	1000.00 Receipt
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Print PAC Mailing Address 100 Daingerfield Rd.			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60421.C6809
	Alexandria	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Receipt
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
		0 0	0 0 0 0 0 0 0	1
Э.	Full Name (Last, First, Middle Initial) National Cattlemens Beef Assn. PAC			Date of Receipt
	Mailing Address 1301 Pennsylvania A	ve.,NW suite	30	10 20 2005
	City	State	Zip Code	Transaction ID: 60421.C6575
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Receipt
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 3000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SI	UBTOTAL of Receipts This Page (optional))	3000.00
т	OTAL This Period (last page this line numbe	er only)		

SC	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\geq	Graves for Congress			
۸.	Full Name (Last, First, Middle Initial) Union Pacific Fund for Effective Governt			Date of Receipt
	Mailing Address 600 Thirteenth Street, No. 240			11 08 2005
	City	State DC	Zip Code	Transaction ID: 60421.C6594
	Washington FEC ID number of contributing		20005	Amount of Each Receipt this Period
	federal political committee.	С		2500.00 Receipt
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		7500.00	
3.	Full Name (Last, First, Middle Initial) Beef-PAC			Date of Receipt
	Mailing Address 5501 I-40 West			10 13 2005
	City	State	Zip Code	Transaction ID: 60421.C6565
	Amarillo	TX	79106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
Э.	Full Name (Last, First, Middle Initial) National Council of Farmer Co-Op PAC			Date of Receipt
	Mailing Address 50 F Street NW Suite 900			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6806
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Occupation		n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2000.00	1
	Other (specify)		2000.00	
SI	UBTOTAL of Receipts This Page (optional)			4500.00
т	OTAL This Period (last page this line number of	only))	

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 105
ITEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and	nay not be sold or used by any person address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Graves for Congress		
Full Name (Last, First, Middle Initial) A. American Crystal Sugar Company PAC		Date of Receipt
Mailing Address 101 North Third Street	7'. 0. 4.	12 21 2005
City State Moorhead MN	Zip Code 56560	Transaction ID: 60421.C6820 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		2000.00
Name of Employer Occupa	tion	Receipt Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify)	n Cycle-to-Date ▼ 3500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 3. Boeing PAC		Date of Receipt
Mailing Address 1200 Wilson Blvd.	11 1 11 2005	
City State	Zip Code	Transaction ID: 60421.C6595
Arlington VA	22209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1000.00
Name of Employer Occupa	tion	Receipt Limit Increased Due to Opponent's
	n Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) American Council of Engineers Co.s PAC		Date of Receipt
Mailing Address 1015 15th Street NW Suite 802		12 21 2005
City State Washington DC	Zip Code 20005	Transaction ID: 60421.C6819
EEO ID combine of a satisfaction	20005	Amount of Each Receipt this Period
federal political committee.		5000.00 Receipt
Name of Employer Occupa	tion	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 Election X Primary General	n Cycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
Other (specify)	7000.00	
SUBTOTAL of Receipts This Page (optional)		8000.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 105 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Report or for commercial purposes, other than us	s and Statements ma sing the name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Graves for Congress			
Full Name (Last, First, Middle Initial) National Beer Wholesalers Assoc. Mailing Address 1100 S. Washin City Alexandria FEC ID number of contributing federal political committee.	State VA	Zip Code 22314-4494	Date of Receipt M M M
Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Cocupation (Cycle-to-Date ▼ 5000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Credit Union Legislative Action Council Mailing Address 601 Pennsylvan (CULAC) City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State DC C	Zip Code 20005-2601 n Cycle-to-Date ▼	Date of Receipt M M M / D 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Credit Union Legislative Action Council Mailing Address 601 Pennsylvan (CULAC) City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State DC C	Zip Code 20005-2601 on Cycle-to-Date ▼	Date of Receipt 1 2
SUBTOTAL of Receipts This Page (opti	onal)		3500.00
TOTAL This Period (last page this line r	number only)		

SCHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 10 / 105
		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d
		Detailed Guillinary Fage	12 13a 13b 14 15
Any information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Graves for Congress			
/			
Full Name (Last, First, Middle Initial) A. American Health Care Assoc. PAC			Date of Receipt
Mailing Address 1201 L Street, N.W.			M M / D D / Y Y Y Y
1201 L 3(166), 14.4V.			12 21 2005
City	State	Zip Code	Transaction ID: 60421.C6781
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing			1000.00
federal political committee.	C		1000.00
Name of Employer	Occupation	<u> </u>	Receipt
Name of Employer	Occupation	1	Limit Increased Due to Opponent's
Receipt For: 2006	L Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General			1
Other (specify) ▼	1	2000.00	
_			1
Full Name (Last, First, Middle Initial)			
Deloitte & Touche Federal PAC			Date of Receipt
Mailing Address P. O. Box 365	11 16 2005		
City	State	Zip Code	Transaction ID: 60421.C6599
Washington	DC	20044-0365	Amount of Each Receipt this Period
		20044 0000	
FEC ID number of contributing federal political committee.	C		2000.00
			Receipt
Name of Employer	Occupation	1	·
Receipt For: 2006	Floation C	vale to Date.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election	ycle-to-Date ▼	
Other (specify)		2000.00	
			1
Full Name (Last, First, Middle Initial)			
ACRE Action Committee For Rural Electri			Date of Receipt
Mailing Address 4301 Wilson Boulevard			10 20 Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60421.C6572
Arlington	VA	22203-1860	
	- VA	22203-1000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
			Receipt
Name of Employer	Occupation	1	'
Descript Form 2000	Flaction 2	undo to Data	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼	
Other (specify)	' '	3000.00	
• (opes)/ •	0 0	0 0 0 0 0 0 0	1
SUBTOTAL of Receipts This Page (optional)			4000.00
TOTAL This Period (last page this line number of	only))	

SC	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 105 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
۹.	Full Name (Last, First, Middle Initial) Ameren Fed PAC			Date of Receipt
	Mailing Address 101 Constitution Ave., N Suite 800			12 30 7 2005
	City	State	Zip Code	Transaction ID: 60421.C6844
	Washington TEO ID average of a carbon state of	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) Ameren Fed PAC			Date of Receipt
	Mailing Address 101 Constitution Ave., N Suite 800	12 30 7 2005		
	City	State	Zip Code	Transaction ID: 60421.C6843
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2000.00	
— C.	Full Name (Last, First, Middle Initial) BNSF Rail PAC			Date of Receipt
	Mailing Address 700 13th St., NW			1 1 0 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60421.C6578
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		5000.00	
SI	UBTOTAL of Receipts This Page (optional)			4500.00
T	OTAL This Period (last page this line number o	nly)		

c	CHEDIII E A /EEC Earm 2 \			FOR LINE NUMBER: PAGE 12 / 105
	CHEDULE A (FEC Form 3)		Use separate schedule(s)	(check only one)
ΙT	EMIZED RECEIPTS		or each category of the	11a 11b X 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
Ar	ny information copied from such Reports and	Statements may	not be sold or used by any pers	
or	for commercial purposes, other than using th	e name and add	dress of any political committee to	o solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
_	· ·			<u>_</u>
	Full Name (Last, First, Middle Initial)			
Α.	Federal Express PAC			Date of Receipt
	Mailing Address 942 S. Shady Grove I	Road		12 30 2005
	City	State	Zip Code	Transaction ID: 60421.C6848
	Memphis	TN	38120	
	•	111	38120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	rederal political committee.			Descript
	Name of Employer	Occupation	n	Receipt
				Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 0.5.C. 44 ra(i)/44 ra-1)
	X Primary General	' '	2000.00	7
	Other (specify) ▼		2000.00	
В.	Full Name (Last, First, Middle Initial) Aircraft Owners & Pilots Assn. PAC			Date of Receipt
٠.	Mailing Address 421 Aviation Way			M M / D D / Y Y Y Y
	Tham ig that our 421 / Wallott Way	11 08 2005		
	City State Zip Code			Transaction ID: 60421.C6577
	Frederick	MD	21701	Amount of Each Receipt this Period
	FEC ID number of contributing			1500.00
	federal political committee.	C		1300.00
	Name of Employer	Occupation	<u> </u>	- Receipt
	rtaine of Employer			Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1		7
	Other (specify)	1	5000.00	
_	Full Name (Last, First, Middle Initial)			Data of Descript
U.	Aircraft Owners & Pilots Assn. PAC Mailing Address 421 Aviation Way			Date of Receipt
	Mailing Address 421 Aviation Way			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6821
	Frederick	MD	21701	Amount of Each Receipt this Period
	FEC ID number of contributing			5000.00
	federal political committee.	C		5000.00
	Name of Employer Occupation		<u> </u>	Receipt
	Name of Employer	Name of Employer Occupation		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		·	7
	Other (specify) ▼		10000.00	
				8500.00
S	UBTOTAL of Receipts This Page (optional) .			8500.00
_				
Т	OTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 105 (check only one) 11a 11b
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Graves for Congress			
Full Name (Last, First, Middle Initial) RJR Political Action Committee Mailing Address 1201 F St. NW Suite 1000 City Washington FEC ID number of contributing federal political committee. Name of Employer	State DC C	Zip Code 20004	Date of Receipt M M M / D D M 2 0 0 5 Transaction ID: 60421.C6593 Amount of Each Receipt this Period 2000.00 Receipt Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Pfizer PAC Mailing Address 235 East 42nd Street City New York FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State NY C Occupation Election C	Zip Code 10017 10017 10 ycle-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Electrical Construction PAC Mailing Address 3 Bethesda, Suite 110 City Bethesda FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State MD C	Zip Code 20814 1000.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional))	4000.00
TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 105 (check only one) 11a 11b
An or	y information copied from such Reports and for commercial purposes, other than using the commercial purposes.	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) American Bankers Association PAC Mailing Address 1120 Connecticut Av City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General	State DC C	Cycle-to-Date ▼	Date of Receipt M M
	Other (specify) Full Name (Last, First, Middle Initial)	0 0	5000.00	
3.	American Bankers Association PAC Mailing Address 1120 Connecticut Av City Washington	e. N.W. State DC	Zip Code 20036	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	Occupation C	n Cycle-to-Date ▼ 6000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
. .	Full Name (Last, First, Middle Initial) General Electric Company PAC Mailing Address 1299 Pennsylvania A	ve. NW		Date of Receipt
	City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State DC C Occupation	Zip Code 20004 n Cycle-to-Date ▼	Transaction ID: 60421.C6830 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SI	UBTOTAL of Receipts This Page (optional))	3500.00
т	OTAL This Period (last page this line number	er only)		

S	CHEDULE A (FEC Form 3)		l le e e e e e e e e e e e e e e e e e	FOR LINE NUMBER: PAGE 15 / 105
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	rnot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
Α.				Date of Receipt
	Mailing Address 701 Pennsylvania Ave	. N.w.		12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6780
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1	500.00	1
	Other (specify) ▼	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) Anheuser-Busch Political Action Committe			Date of Receipt
	Mailing Address 1401 Street NW, Suite	12 30 2005		
	City	State	Transaction ID: 60421.C6845	
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			1
	Other (specify) ▼	0 0	5000.00	
C.	Full Name (Last, First, Middle Initial) Anheuser-Busch Political Action Committe			Date of Receipt
	Mailing Address 1401 Street NW, Suite	200		1 2 3 0 2 0 0 5
	City	State	Zip Code	Transaction ID: 60421.C6846
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer	Occupation	ו	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		7000.00	1
	Other (specify) ▼		7000.00	
s	UBTOTAL of Receipts This Page (optional)			3000.00
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S	CHEDULE A (FEC Form 3)		FOR LINE NUMBER: PAGE 16 / 105
	•	′	Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
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\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Indoor Tanning Association, Inc. PAC			Date of Receipt
	Mailing Address PO Box 4001			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6833
	Jackson	MI	49204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt
	Receipt For: 2006	Election C	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	, ,	1000.00	7
	Other (specify)	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) Lumber Dealers Political Action Committe			Date of Receipt
	Mailing Address 40 Ivy St SE	1 2 2 1 2 0 0 5		
	City	State	Zip Code	Transaction ID: 60421.C6801
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Employer	Occupation	า	Receipt
	Traine or Employe.			Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-	1000.00	7
	Other (specify)	0 0	1000.00	
C.	Full Name (Last, First, Middle Initial) John Deere Political Action Committee			Date of Receipt
	Mailing Address One John Deere Pl	ace		11 08 2005
	City	State	Zip Code	Transaction ID: 60421.C6590
	Moline	IL	61265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
	• •			Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	7
	Other (specify) ▼	0 0	1000.00	_
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or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	hot be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
	,			
/	Graves for Congress			
_	Full Name (Last, First, Middle Initial)			
Α.	Land OLakes PAC			Date of Receipt
	Mailing Address P. O. Box 64101			M M / D D / Y Y Y Y
	3 1. G. Box 61101			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6799
	Saint Paul	MN	55164	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	·			Receipt
	Name of Employer	Occupation	n	
				Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
	X Primary General	1	2000.00	7
	Other (specify)		2000.00	
	Full Name (Last, First, Middle Initial)			5. (5.).
В.	Mike R Fund			Date of Receipt
	Mailing Address P. O. Box 65796			12 21 2005
	City			
	City	State	Zip Code	Transaction ID: 60421.C6837
	Washington	DC	20035	Amount of Each Receipt this Period
	FEC ID number of contributing	C		2500.00
	federal political committee.			
	Name of Employer	Occupation	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		· · · · · · · · · · · · · · · · · · ·	7
	Other (specify) ▼		2500.00	
				_
_	Full Name (Last, First, Middle Initial)			
C.	DTAG PAC			Date of Receipt
	Mailing Address 5330 E 31st St			12 21 2005
	City.	Ctata	Zip Code	
	City	State	•	Transaction ID: 60421.C6826
	Tulsa	OK	74135	Amount of Each Receipt this Period
	FEC ID number of contributing	C		3500.00
	federal political committee.	•		
	Name of Employer	Occupation	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			1
	Other (specify) ▼		5000.00	
				7000.00
s	UBTOTAL of Receipts This Page (optional)			7000.00
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S	CHEDULE A (FEC Form 3)		Harana and a shark late (s)	FOR LINE NUMBER: PAGE 18 / 105			
	· ·		Use separate schedule(s) or each category of the	(check only one)			
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d			
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An or	y information copied from such Reports and S for commercial purposes, other than using the	statements may name and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Graves for Congress			_			
A.				Date of Receipt			
	Mailing Address 1155 21st Street, N. W	<i>I</i> .		111 / 16 / 2005			
	City	State	Zip Code	Transaction ID: 60421.C6600			
	Washington	DC	20036	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's			
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General			1			
	Other (specify)	0 0	1000.00				
В.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of K.C. Fed PAC	•		Date of Receipt			
	Mailing Address P.O. Box 419169	12 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: 60421.C6728			
	Kansas City	MO	64141	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's			
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General			1			
	Other (specify) ▼	0 0	3000.00				
C.	Full Name (Last, First, Middle Initial) Hardwood Federation PAC			Date of Receipt			
	Mailing Address P.O. Box 34518			1 1 1 6 2 0 0 5			
	City	State	Zip Code	Transaction ID: 60421.C6603			
	Memphis	TN	38184	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's			
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General Other (specify) ▼		1000.00				
[°	UBTOTAL of Receipts This Page (optional)			3000.00			
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SCHEDULE A (FE ITEMIZED RECEIF			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NU (check only on 11a	ie)	PAGE 19/105	15
Any information copied from or for commercial purposes,	such Reports and Statemen other than using the name a	nts may i	not be sold or used by any personess of any political committee to	n for the purpose	of solicitin	ng contributions	
NAME OF COMMITTEE Graves for Congress	(In Full)						
Full Name (Last, First, Mi Air Pac Mailing Address 1301 City Washington FEC ID number of contrib federal political committee Name of Employer Receipt For: 20	Pennsylvania Ave., Suit Sta DO Dutting e. Occ	cate C cupation	Zip Code 20004 ccle-to-Date ▼	Receipt	n ID: 604 Each Rece	2005]
	deneral	ection Gy	500.00				
Full Name (Last, First, Minimum National Air Transportation Mailing Address 4226 City Alexandria FEC ID number of contribing federal political committee Name of Employer Receipt For: 20 X Primary Grant Contribing Contribution Con	PAC King St. Sta VA Dutting e. Occ	cupation	Zip Code 22302 cle-to-Date ▼ 1000.00	Receipt	n ID: 604 Each Rece	2 0 0 5 21.C6607 Sipt this Period 1000.00 te to Opponent's 5. 441a(i)/441a-1)]
City Washington FEC ID number of contrit federal political committee Name of Employer Receipt For: 20	Stanization K St. NW, Suite 1100 Stanization C Duting St. C	cupation	Zip Code 20006 cle-to-Date ▼	Receipt	n ID: 604 Each Rece	2 0 0 5 21.C6598 eipt this Period 1000.00 te to Opponent's 5. 441a(i)/441a-1)]
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S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 105
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or	for commercial purposes, other than using	the name and add	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Growth and Prosperity PAC			Date of Receipt
	Mailing Address 1155 21st St, NW,	Suite 300		12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6831
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer	Occupation	n	Receipt
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		5000.00	7
	Other (specify) ▼	0 0	3000.00	
В.	Full Name (Last, First, Middle Initial) General Motors Corporation PAC			Date of Receipt
	Mailing Address 1660 L Street, NW	11 08 2005		
	City	State	Zip Code	Transaction ID: 60421.C6585
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing			2500.00
	federal political committee.	C		2500.00
	Name of Employer	Occupation	 n	Receipt
	F 37			Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		4500.00	7
	Other (specify)		+300.00	
C.	Full Name (Last, First, Middle Initial) Rice Federation PAC			Date of Receipt
	Mailing Address 4301 North Fairfax	Dr., Ste 305		10 13 2005
	City	State	Zip Code	Transaction ID: 60421.C6568
	Arlington	VA	22203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Flaction C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Election	ycle-to-Date ¥	
	Other (specify)		500.00	
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T	OTAL This Period (last page this line num	ber only)		

_				FOR LINE NUMBER: PAGE 21 / 105
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			Detailed Summary Page	11a 11b X 11c 11d 11d
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An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee
.	NAME OF COMMITTEE (In Full)	Tidino dila da	areas or arry pointed committee to	Control Control Control Control
\	,			
/	Graves for Congress			
_	Full Name (Last, First, Middle Initial)			
۹.	Bryan Cave LLP Political Fund			Date of Receipt
	Mailing Address 700 13th St, NW, Ste 7	700		M M / D D / Y Y Y Y
				10 20 2005
	City	State	Zip Code	Transaction ID: 60421.C6573
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Employer	Occupatio		Receipt
	Name of Employer	Occupatio		Limit Increased Due to Opponent's
	Receipt For: 2006	Flection (Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Licotion	yele to bate 🔻	1
	Other (specify)		1000.00	
		0 0	0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
3.	Bryan Cave LLP Political Fund			Date of Receipt
	Mailing Address 700 13th St, NW, Ste 7	M M / D D / Y Y Y Y		
		11 08 2005		
	City State Zip Code			Transaction ID: 60421.C6579
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			1000.00
	Name of Employer	Occupatio	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			1
	Other (specify) ▼	l I	2000.00	
				1
	Full Name (Last, First, Middle Initial)			
) .	Daimler Chrysler Corporation PAC			Date of Receipt
	Mailing Address 1000 Chrysler Drive			11 08 2005
	City	State	Zip Code	Transaction ID: 60421.C6580
	Auburn Hills	MI	48326	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
				Receipt
	Name of Employer	Occupatio	n	· '
	Descript Farm 2000		Suele te Date -	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	⊨lection C	Cycle-to-Date ▼	
	Other (specify)		1000.00	
	Carlot (opcoiny) \		0 0 0 0 0 0 0	1
SI	UBTOTAL of Receipts This Page (optional)			3000.00
т	OTAL This Period (last page this line number	only)		

	HEDULE A (FEC Form 3) EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 105 (check only one) 11a
Any or fo	information copied from such Reports and or commercial purposes, other than using t	Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) Graves for Congress			
• I I I I I I I I I I I I I I I I I I I	Full Name (Last, First, Middle Initial) Internation Asson. of Fire Fighiters PAC Mailing Address 1750 New York Ave, City Washington FEC ID number of contributing ederal political committee. Name of Employer Receipt For: 2006 X Primary General	State DC C	Cycle-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Other (specify) Full Name (Last, First, Middle Initial) Internation Asson. of Fire Fighiters PAC	0 0	1000.00	Date of Receipt
	Mailing Address 1750 New York Ave, City Washington FEC ID number of contributing ederal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State DC C Occupation	Zip Code 20006 n Cycle-to-Date ▼	Transaction ID: 60421.C6851 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. M C H f	Full Name (Last, First, Middle Initial) Match Pac Mailing Address 7300 Beaufont Sprin City Richmond FEC ID number of contributing ederal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State VA C	Zip Code 23225 n Cycle-to-Date ▼ 1000.00	Date of Receipt M M O B
SU	BTOTAL of Receipts This Page (optional)		<u>)</u>	3000.00
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Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Graves for Congress		, , ,	
Α.	Full Name (Last, First, Middle Initial) JM Family PAC Mailing Address 111 Jim Moran Boulev City Deerfield Beach FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006	State FL C Occupation	Zip Code 33442 n Cycle-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	X Primary General Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) Clear Channel Communications PAC Mailing Address 1401 Street NW Suite	e 401		Date of Receipt 1 2 2 1 2 0 0 5
	City Washington	State DC	Zip Code 20005	Transaction ID: 60421.C6789
	FEC ID number of contributing federal political committee.	C	20003	Amount of Each Receipt this Period
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	n Cycle-to-Date ▼ 1000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Mailing Address 5420 Old Orchard Rd			Date of Receipt 1 2 2 1 2 0 0 5
	Suite A100 City	State	Zip Code	Transaction ID: 60421.C6818
	Skokie	IL	60077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00 Receipt
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			3000.00
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S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 105
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or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Stanley K. Griffin			Date of Receipt
	Mailing Address No. 1 Whispering Woo P. O. Box 232			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6617
	Rock Port	MO	64482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Griffin Farms	Farm Ma	nager	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		575.00	
	Other (specify) ▼			
В.	Full Name (Last, First, Middle Initial) Karl E. Sigler			Date of Receipt
	Mailing Address 32813 E. Oak Hill Sch	12 30 2005		
	City	State Zip Code		Transaction ID: 60421.C6862
	Oak Grove	MO	64075	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1100.00
	federal political committee.			1100.00
	Name of Employer	Occupation	1	Receipt
	Enterprise Interiors Inc.	Corp. Pre	esident	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2100.00	7
	Other (specify)		0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) Robert G. Bolin, Jr.			Date of Receipt
Ο.	Mailing Address 3955 Riverside Terrac			M M / D D / Y Y Y Y
		C		12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6759
	Saint Joseph	MO	64507	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.	<u> </u>		
	Name of Employer Bolin Auto & Truck Parts	Occupation	1	Receipt
		Sales		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		500.00	
	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			2100.00
H				
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 105
ITEMIZED RECEIPTS		or each category of the		(check only one)
••			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15
Δr	y information copied from such Reports and Si	ratements may	not he cold or used by any nerse	
or	for commercial purposes, other than using the	name and add	ress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Marilyn, A. Shaum			Date of Receipt
	Mailing Address 1100 Elm Street			111 / 16 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60421.C6610
	<u>Tarkio</u>	MO	64491	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer Homemaker	Occupation		Receipt
	Homemaker	Homemal	ker	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	2100.00	1
	Other (specify) ▼	0 0		
В.	Full Name (Last, First, Middle Initial) Woodrow Kline			Date of Receipt
	Mailing Address 1910 Lakeview Dr.			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6688
	Chillicothe	MO	64601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer	Occupation	1	Receipt
	Woodys Dodge Jeep Eagle	Salesman Election Cycle-to-Date ▼		Limit Increased Due to Opponent's
	Receipt For: 2006			Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		200.00	1
			0 0 0 0 0 0 0	1
C.	Full Name (Last, First, Middle Initial) Jimmie D. Carter			Date of Receipt
	Mailing Address 3301 N. Belt Hwy. 3302 E. Devonshire			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6788
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C		1000.00
	Name of Employer Camolaur, Inc.		1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	President	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	LICOTION O		1
	Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional)			3300.00
	OTAL This Period (last page this line number		•	
1 "	OTAL THIS FEHOU (IAST PAYE THIS HITE HUMBER)	лпу)	·······	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 105 (check only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Graves for Congress		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Α.	Full Name (Last, First, Middle Initial) Gregory L. Henson Mailing Address 2513 SW Still Meadow City Blue Springs FEC ID number of contributing federal political committee. Name of Employer Heartland Tanning Supply Receipt For: 2006	State MO C Occupation Presiden		Date of Receipt M M 2 1 2 0 0 5
	X Primary General Other (specify) ▼	0 0	2000.00	
В.	Full Name (Last, First, Middle Initial) Joseph A. Kneib Mailing Address 26665 W. 103rd Stree City	t State	Zip Code	Date of Receipt M M
	Olathe FEC ID number of contributing federal political committee. Name of Employer Herzog Contracting Corporatio	C Occupation Vice-Pres		Amount of Each Receipt this Period 500.00 Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) Michael W. Wilson Mailing Address 1018 NW Clinton Cour	nty Line Roa	d	Date of Receipt 1 2 0 2 2 0 0 5
	City Smithville	State MO	Zip Code 64089-8215	Transaction ID: 60421.C6723 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	n	Source So
	Name of Employer Secure Pharmacy Plus Receipt For: 2006 X Primary General Other (specify) ▼	Pharmac		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			3000.00
Г	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form	m 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 105 (check only one)	
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15	
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Graves for Congress				
Full Name (Last, First, Middle Initia Joseph A. Lovenduski Mailing Address 23747 Hwy P. City Brookfield FEC ID number of contributing federal political committee.	State MO	Zip Code 64628	Date of Receipt M M M	
Name of Employer Self-Employed Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Self Emp		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, First, Middle Initia Harvey Tettlebaum Mailing Address 56295 Little M	arvey Tettlebaum			
City California	State MO	Zip Code 65018	Transaction ID: 60421.C6864 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		100.00 Receipt	
Name of Employer Husch Eppenberger Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Attorney Election C	cycle-to-Date ▼ 200.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, First, Middle Initia)		Date of Receipt	
Mailing Address 3119 La Rono	la Place, NE		1 2 2 1 2 0 0 5	
City <u>Albuquerque</u>	State NM	Zip Code 87110	Transaction ID: 60421.C6811 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		1500.00	
Name of Employer Self Employed Receipt For: 2006	Occupation Farmer Election C	n Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General Other (specify)	1 1	1500.00		
SUBTOTAL of Receipts This Page (o	optional)		1850.00	
TOTAL This Period (last page this lin	e number only)			

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 105
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
۹.	Full Name (Last, First, Middle Initial) Hal R. Sinclair			Date of Receipt
	Mailing Address 8609 N. Shannon Ave.			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6632
	Kansas City	MO	64153-1777	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Phoenix Scientific, Inc.	Occupatio	n	Receipt
		Veternar	<u> </u>	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	Spanialing (2 010101 1 114(1) 1 114 1)
	Other (specify)		250.00	
3.	Full Name (Last, First, Middle Initial) Tom Broderick	1		Date of Receipt
	Mailing Address 6841 N. Highway 33	12 02 7 2005		
	City	State	Zip Code	Transaction ID: 60421.C6651
	Plattsburg	MO	64477	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self Employed	Occupatio	n	Receipt
		Farmer		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	
	Other (specify) ▼		292.00	
	Full Name (Last, First, Middle Initial) Norman J. , Jr. Jester			Date of Receipt
	Mailing Address 5820 NW 96th Dr	11 16 2005		
	City	State	Zip Code	Transaction ID: 60421.C6608
	Pompano Beach	<u>FL</u>	33076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2100.00
	Name of Employer Hercog Transit Service	Occupatio Executive		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2100.00	
S	UBTOTAL of Receipts This Page (optional)	1		2192.00
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
T	OTAL This Period (last page this line number	only))	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) D. P. Coleman Mailing Address 7902 NW Scenic Dr. City Kansas City FEC ID number of contributing federal political committee. Name of Employer Coleman Industrial Constn Receipt For: 2006 X Primary General Other (specify)		Zip Code 64152-1645 n Contractor Cycle-to-Date 500.00	Date of Receipt M M
3.	Full Name (Last, First, Middle Initial) Harry Broermann Mailing Address 13833 M Ave. City Tarkio FEC ID number of contributing	State MO	Zip Code 64491	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Federal political committee. Name of Employer Self Employed Receipt For: 2006 X Primary General Other (specify)		n & Historian Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
- .	Full Name (Last, First, Middle Initial) Carole C. Coots Mailing Address 2104 Fourth St City Platte City FEC ID number of contributing federal political committee. Name of Employer Wells Bank of Platte City Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Banker Election C	Zip Code 64079 n Cycle-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			642.00
Т	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3)		Llas congreto cohodulo(s)	FOR LINE NUMBER: PAGE 30 / 105
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\geq	Graves for Congress			
A.				Date of Receipt
	Mailing Address 1300 NW 43rd Ter.			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6743
	Kansas City	MO	64116-1689	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Homemaker	Occupation	า	Receipt
	Homemaker	Homema	ker	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1100.00	7
	Other (specify) ▼	0 0	1100.00	
В.	Full Name (Last, First, Middle Initial) R. Philip Acuff			Date of Receipt
	Mailing Address 3015 Miller Rd	10 20 2005		
	City	State	Zip Code	Transaction ID: 60421.C6570
	Saint Joseph	MO	64506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	Receipt
	Retired	Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 0.3.0. 44 ra(1)/44 ra-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Tom B. Kretsinger, Sr.	1		Date of Receipt
	Mailing Address P. O. Box 516	12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 60421.C6858
	Liberty	MO	64069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer_	Occupation	า	Receipt
	American Central Transpor- t,Inc	President		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-	1100.00	7
	Other (specify) ▼ 1100.00			
s	UBTOTAL of Receipts This Page (optional)	•		2100.00
 -	OTAL This Period (last page this line numbe	r only)		

91	CHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 31 / 105
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d
			Detailed Suffilliary Fage	12 13a 13b 14 15
An	y information copied from such Reports and St	atements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
or 1	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
_				
	Full Name (Last, First, Middle Initial) Gerald Gorman			Date of Receipt
٦.	Mailing Address 917 E. Vivion Road			⊣
	Walling Address 917 E. VIVIOTI HOAd			12 30 2005
	City	State	Zip Code	Transaction ID: 60421.C6850
	Kansas City	MO	64118	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		2100.00
	Name of Francisco	10		Receipt
	Name of Employer Slagel, Bernard	Occupatio Lawyer	П	Limit Increased Due to Opponent's
	Receipt For: 2006		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Licotion	yole to Bate V	1
	Other (specify) ▼		2100.00	
	Full Name (Last, First, Middle Initial)			
3.	Larry Hamann			Date of Receipt
	Mailing Address 512 Macon			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6672
	Brookfield	MO	64628	
		IVIO	04020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
				Receipt
	Name of Employer Retired	Occupatio	n	· ·
	D 115	Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	3(1111)
	Other (specify)	' '	200.00	
	Curior (openity) 🔻	0 0	1 1 1 1 1 1 1	
	Full Name (Last, First, Middle Initial)			
Э.	David Ericks			Date of Receipt
	Mailing Address 5005 Glenrose			M M / D D / Y Y Y Y
		01-1-	7in Onda	11 16 2005
	City Miccosukee Cpo	State FL	Zip Code	Transaction ID: 60421.C6601
		- FL	32309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
				Receipt
	Name of Employer Occupation Self Employed Occupation			· '
	Government		nental Constultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spontaining (2 stores + 1 ta(t)) + 1 ta + 1)
	X Primary General Other (specify) ▼		1500.00	
	Cirici (Specify)	0 0		1
SI	JBTOTAL of Receipts This Page (optional)			3650.00
T	OTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 105 (check only one)
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Graves for Congress		71	
Α.	Full Name (Last, First, Middle Initial) Robert Gunderson Mailing Address 20789 County Rd. 306			Date of Receipt
	City	State	Zip Code	1 2 0 2 2 0 0 5 Transaction ID: 60421.C6670
	Saint Joseph FEC ID number of contributing federal political committee.	C	64505-9367	Amount of Each Receipt this Period
	Name of Employer Phoenix Scientific, Inc. Receipt For: 2006 X Primary General Other (specify) ▼		n sident, Regulatory Af Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Victor Hurlbert Mailing Address 9701 N. Kenwood Ct.			Date of Receipt
	City Kansas City	State MO	Zip Code 64155	Transaction ID: 60421.C6684 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	04100	250.00
	Name of Employer Clay County, Missouri Receipt For: 2006 X Primary General Other (specify) ▼	Occupatio Auditor Election C	Cycle-to-Date ▼ 500.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) John Holton Mailing Address 13900 NW 72nd Street			Date of Receipt
	City	State	Zip Code	1 2 0 2 2 0 0 5 Transaction ID: 60421.C6680
	Kansas City FEC ID number of contributing federal political committee.	C	64152	Amount of Each Receipt this Period 500.00
	Name of Employer Mail Solutions Receipt For: 2006 X Primary General Other (specify) ▼	Occupatio CEO Election C	n Cycle-to-Date ▼ 750.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			850.00
T	OTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 105 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Jane Copsey Mailing Address P.O. Box 112 City Maitland FEC ID number of contributing federal political committee.	State MO	Zip Code 64466	Date of Receipt M M M
	Name of Employer Hallway Telephone Co. Receipt For: 2006 X Primary General Other (specify) ▼	Occupation owner Election C	cycle-to-Date ▼ 367.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Linda Cozad Mailing Address 21550 92 Hwy City Platte City FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Homema		Date of Receipt M M 2 1 2 0 0 5
C.	Full Name (Last, First, Middle Initial) Nikki Parshall Mailing Address 811 Elm Street City Tarkio FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Retired Election C	Zip Code 64491 n Cycle-to-Date ▼	Date of Receipt M
s	SUBTOTAL of Receipts This Page (optional)			492.00
Т	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 105
ITEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	X 11a
Any information copied from such Reports and Statement or for commercial purposes, other than using the name at	ts may not be sold or used by any person address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	, in the second	
Graves for Congress		
Full Name (Last, First, Middle Initial) Wesley Norton		Date of Receipt
Mailing Address 1368 NW 296th	da 7'- Oada	12 02 2005
City Sta Plattsburg MC	'	Transaction ID: 60421.C6764 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		42.00
Name of Employer Occu Self Employed Farr	upation mer	Receipt Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify) ▼	tion Cycle-to-Date ▼ 267.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 3. Clark, W. Hampton		Date of Receipt
Mailing Address 6 Antilles Dr.	12 02 2005	
City Star Saint Joseph MC	'	Transaction ID: 60421.C6738
FFO ID accept on of a catalla time.	5 64306	Amount of Each Receipt this Period
federal political committee.		250.00 Receipt
Name of Employer Occu Retired Reti	upation rod	Limit Increased Due to Opponent's
	tion Cycle-to-Date	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify)	350.00	
Full Name (Last, First, Middle Initial) Deggy Swearingin		Date of Receipt
Mailing Address 29654 CR 191		12 02 2005
City Sta	'	Transaction ID: 60421.C6769
Carrollton MC	O 64633	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		42.00 Receipt
Information Reduceted	upation rmation Requested	Limit Increased Due to Opponent's
	tion Cycle-to-Date \blacktriangledown	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	217.00	
SUBTOTAL of Receipts This Page (optional)	>	334.00
TOTAL This Period (last page this line number only)	>	

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may he name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Doug Summa Mailing Address 509 Main St. City Tarkio FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Pharmace Election C		Date of Receipt M M
3.	Full Name (Last, First, Middle Initial) Ed Wolfe Mailing Address PO Box 613	0 0		Date of Receipt
	City Richmond FEC ID number of contributing federal political committee.	State MO	Zip Code 64085	1 2 0 2 2 0 0 5 Transaction ID: 60421.C6720 Amount of Each Receipt this Period 250.00
	Name of Employer Self Employed Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Self Emp		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
- .	Full Name (Last, First, Middle Initial) Ben Wierzbicki Mailing Address 113 Delores St City Excelsior Springs FEC ID number of contributing federal political committee. Name of Employer Self Employed	State MO C Occupation Insurance	Zip Code 64024	Date of Receipt M
	Receipt For: 2006 X Primary General Other (specify) ▼	0 0	tycle-to-Date ▼ 1200.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)			700.00
T	OTAL This Period (last page this line numb	er only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Matt Jessee Mailing Address 700 13th Street, NW City Washington FEC ID number of contributing federal political committee. Name of Employer Bryan Cave Receipt For: 2006 X Primary General Other (specify)		Zip Code 20005 1 Federal Affairs Sycle-to-Date ▼	Date of Receipt M
3.	Full Name (Last, First, Middle Initial) Daivd Franasiak Mailing Address 873 Coachway City Annapolis FEC ID number of contributing federal political committee. Name of Employer Williams and Jensen Receipt For: 2006 X Primary General Other (specify)	State MD C Occupation Vice Present Election C		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) Susan Hirschmann Mailing Address 4052 Seminary Rd City Alexandria FEC ID number of contributing federal political committee. Name of Employer Williams and Jensen Receipt For: 2006 X Primary General Other (specify)	State VA C Occupation Partner Election C	Zip Code 22304	Date of Receipt M
S	UBTOTAL of Receipts This Page (optional))	1500.00
T	OTAL This Period (last page this line number o	nly))	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 105 (check only one)		
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 11d		
			Detailed Summary Page	12 13a 13b 14 15		
Ar	ny information copied from such Reports and Statements	ts may	not be sold or used by any person	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the name and	na ado	ress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
/	Graves for Congress					
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	John Oliver, III			Date of Receipt		
	Mailing Address PO Box 559			M M / D D / Y Y Y Y		
	City	***	Zin Cada	11 08 2005		
	City State Cape Girardeau MO		Zip Code 63702	Transaction ID: 60421.C6592		
	FFO ID works of contribution		03702	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			500.00		
	Name of Employer Occup	upation	1	Receipt		
	Name of Employer Self Employed Attorn			Limit Increased Due to Opponent's		
	Receipt For: 2006 Election	tion C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General	-	500.00	1		
	Other (specify) ▼	0	300.00			
В.	Full Name (Last, First, Middle Initial) Marilyn Lawrence			Date of Receipt		
٥.	Mailing Address 28589 Lake Ave Way			M M / D D / Y Y Y Y		
				11 16 2005		
	City State	ate	Zip Code	Transaction ID: 60421.C6605		
	<u>Frontenac</u> MN	<u> </u>	55026	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee			1000.00		
	federal political committee.	-				
	Name of Employer Lawrence Property Mgt.,	upation	1	Receipt		
	Inc Prope		Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
		tion C	ycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)		
	X Primary General		1000.00			
	Other (specify) ▼	0				
C.	Full Name (Last, First, Middle Initial) John P. McAllister			Date of Receipt		
	Mailing Address 326 South Carolina Ave, SE			M ' M / D ' D / Y ' Y ' Y ' Y		
	·			11 16 2005		
	City State		Zip Code	Transaction ID: 60421.C6606		
	Washington DC	<u>; </u>	20003	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			250.00		
	rederal political committee.			Pennint		
		•		Receipt		
			ental Relations	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
		tion C	ycle-to-Date ▼			
	X Primary General Other (specify)		250.00			
		0	0 0 0 0 0 0 0	1		
	LIPTOTAL of Populate This Page (antional)			1750.00		
S	UBTOTAL of Receipts This Page (optional)					
T	TOTAL This Period (last page this line number only)					

IT	CHEDULE A (FEC Form 3 EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports an for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Donna M. Jester Mailing Address 5820 NW 96th Dr City Pompano Beach FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General	State FL C Occupation Homema		Date of Receipt M
3.	Full Name (Last, First, Middle Initial) James Shaum Mailing Address 1100 Elm St			Date of Receipt
	City Tarkio FEC ID number of contributing federal political committee.	State MO	Zip Code 64491	1 1 1 6 2 0 0 5 Transaction ID: 60421.C6611 Amount of Each Receipt this Period 400.00
	Name of Employer Retired Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Retired Election C	ycle-to-Date ▼ 400.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
D.	Full Name (Last, First, Middle Initial) Steve Irvine Mailing Address 21290 US HWY 59 City Tarkio FEC ID number of contributing federal political committee.	State MO	Zip Code 64491	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self Employed Receipt For: 2006 X Primary General Other (specify)	Occupation Farmer	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SI	UBTOTAL of Receipts This Page (optional))	1050.00
T	OTAL This Period (last page this line numl	per only)		

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any or f	y information copied from such Reports and or commercial purposes, other than using t	Statements may he name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Karen Lovenduski Mailing Address 23747 HWY P City Brookfield FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General Other (specify)	State MO C Occupation Homema		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) Neal Patterson Mailing Address 20 E Dundee Cir City Belton FEC ID number of contributing federal political committee. Name of Employer Cerner Corporation Receipt For: 2006 X Primary General	State MO C Occupation CEO Election C	Zip Code 64012 n cycle-to-Date ▼	Date of Receipt M
C.	Full Name (Last, First, Middle Initial) Bonnie Goins Mailing Address PO Box 8007 City Saint Joseph FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: 2006 X Primary General Other (specify) ▼	State MO C Occupation Homema Election C	Zip Code 64508	Date of Receipt M M M
SI	JBTOTAL of Receipts This Page (optional))	920.00
TC	OTAL This Period (last page this line numb	er only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 105 (check only one)
Ar	ny information copied from such Reports and for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Robert K. Arensberg Mailing Address 1401 Street NW Sui	to 1100		Date of Receipt
	City	State	Zip Code	1 2 2 1 2 0 0 5 Transaction ID: 60421.C6822
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Gage Business Consulting		ent Affairs	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify)	Election C	cycle-to-Date ▼ 1000.00	Sportaling (2 0.0.0. 4414(1)) 4414 1)
В.		•		Date of Receipt
	Mailing Address 1547 Evers Drive City	State	Zip Code	12 21 2005
	Mc Lean	VA	22101	Transaction ID: 60421.C6823 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	LE IOI	1000.00
	Name of Employer Self Employed		ental Constultant	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 1000.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Jim Frank	•		Date of Receipt
	Mailing Address 1200 Hamptondale			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6827
	Winnetka	<u>IL</u>	60093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Receipt
	Name of Employer Wheels, Inc. Receipt For: 2006	Occupation Presiden		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional) .			2500.00
Т	OTAL This Period (last page this line numbe	r only)		

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 105 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Jim Frank Mailing Address 1200 Hamptondale City Winnetka FEC ID number of contributing federal political committee. Name of Employer Wheels, Inc. Receipt For: 2006 X Primary General	State IL C Occupation Presiden Election C	t/CEO Cycle-to-Date ▼	Date of Receipt M M M
 3.	Other (specify) Full Name (Last, First, Middle Initial) Karen Frank	0 0	2000.00	Date of Receipt
.	Mailing Address 1200 Hamptondale City	State	Zip Code	1 2 2 1 2 0 0 5 Transaction ID: 60421.C6829
	Winnetka FEC ID number of contributing federal political committee.	C	60093	Amount of Each Receipt this Period 2000.00
	Name of Employer Simply Splendid Receipt For: 2006 X Primary General Other (specify)	Occupation owner Election C	cycle-to-Date ▼ 2000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 C.	Full Name (Last, First, Middle Initial) George Kilroy Mailing Address 7110 Charles Spring V	Vay		Date of Receipt 1 2 2 1 2 0 0 5
	City	State	Zip Code	Transaction ID: 60421.C6834
	Towson FEC ID number of contributing federal political committee.	MD C	21204	Amount of Each Receipt this Period 250.00
	Name of Employer PHH Arval Receipt For: 2006 X Primary General Other (specify) ▼	Occupation President Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			3750.00
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 42 / 105
	EMIZED RECEIPTS	,	or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	I Statements may he name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Graves for Congress			
A.	Full Name (Last, First, Middle Initial) Jane Garvey Mattoon			Date of Receipt
	Mailing Address 6344 Cavalier Corrid			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6835
	Falls Church	VA	22044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Homemaker	Occupation	1	Receipt
	Homemaker	Homema	ker	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1	1000.00	7
	Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) William McKee			Date of Receipt
	Mailing Address 303 Willowmere Ln	1 2 2 1 2 0 0 5		
	City	State	Zip Code	Transaction ID: 60421.C6836
	Ambler	PA	19002	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Familian			Receipt
	Name of Employer Automotive Resources	Occupation President		Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	2.000.011 0		7
	Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Gary Rappeport	'		Date of Receipt
	Mailing Address 2315 Sanders Rd			12 21 2005
	City	State	Zip Code	Transaction ID: 60421.C6839
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		2100.00
	Name of Employer Donlen Corporation	Occupation		Receipt
		President		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	X Primary General	' '	2100.00	11
	Other (specify) ▼			
	UBTOTAL of Receipts This Page (optional)			3600.00
\vdash	ODITION OF RECEIPTS THIS Page (Optional)			
Ι,	OTAL This Period (last page this line numb	er only)	1	

SCHE	DULE A (FEC Form 3)		Llas concrete cohodulo(a)	FOR LINE NUMBER: PAGE 43 / 105
	ZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Any infor	mation copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions solicit contributions from such committee.
NAM	E OF COMMITTEE (In Full) res for Congress		,,,	
A. Gary I Mailin City Itasc FEC I federa	D number of contributing al political committee.	State IL C	Zip Code 60143	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Recei	of Employer y, Inc. pt For: 2006 Primary General Other (specify)	Occupation Chairman Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Leigh	ame (Last, First, Middle Initial) Lamora g Address 501 Slaters Lane No. 11	10		Date of Receipt 1 2 3 0 2 0 0 5
City Alexa	andria	State VA	Zip Code 22314	Transaction ID: 60421.C6852 Amount of Each Receipt this Period
	D number of contributing al political committee.	C		2100.00
Recei	of Employer Employed pt For: 2006 Primary General Other (specify)	-	ental Relations ycle-to-Date 2100.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Leigh	ame (Last, First, Middle Initial) Lamora			Date of Receipt
City	g Address 501 Slaters Lane No. 11	10 State	Zip Code	1 2 3 0 2 0 0 5 Transaction ID: 60421.C6853
•	andria	VA	22314	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		400.00
	of Employer imployed		ental Relations	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Hecel	pt For: 2006 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 2500.00	
SUBTO	TAL of Receipts This Page (optional)			3500.00
TOTAL	This Period (last page this line number o	nly)		

FOR LINE NUMBER: PAGE 44 / 105 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) A. David Reid Date of Receipt Mailing Address 3709 NE 95th ST 12 30 2005 City Zip Code State Transaction ID: 60421.C6860 Kansas City MO 64156 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Receipt Name of Employer Bryan Cave Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Partner Receipt For: 2006 Election Cycle-to-Date X Primary General 400.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	400.00
TOTAL This Period (last page this line number only)	•	40180.00

SCHEDULE A (FEC Form 3)				FOR LINE NUMBER: PAGE 45 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a X 11b 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and Sifor commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	Graves for Congress			
Α.	·			Date of Receipt
	Mailing Address 320 First Street, S.E.			10 14 2005
	City	State	Zip Code	Transaction ID: 60421.C6569
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		98.00
	Name of Employer	Occupation	 1	In-Kind
	F 37			Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		98.00	Fax sent on behalf of can-
	Other (specify) ▼	0 0	98.00	didat
В.	Full Name (Last, First, Middle Initial) National Republican Congressional Commit			Date of Receipt
	Mailing Address 320 First Street, S.E.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60421.C6576
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing			98.00
	federal political committee.	C		
	Name of Employer	Occupation	 1	In-Kind
	, ,	'		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		196.00	Fax sent on behalf of can- didat
_	Full Name (Last, First, Middle Initial)			
C.	National Republican Congressional Commit			Date of Receipt
	Mailing Address 320 First Street, S.E.			12 02 2005
	City	State	Zip Code	Transaction ID: 60421.C6774
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		98.00
	Name of Employer	Occupation	١	In-Kind Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	294.00	fax sent on behalf of can- didat
s	UBTOTAL of Receipts This Page (optional)			294.00
\vdash				
1 [OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 105 (check only one) 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Graves for Congress			
Full Name (Last, First, Middle Initial) National Republican Congressional Commit Mailing Address 320 First Street, S.E City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) National Republican Congressional Commit Mailing Address 320 First Street, S.E City Washington FEC ID number of contributing federal political committee. Name of Employer	State DC C Occupatio	Zip Code 20003	Date of Receipt 1 2
Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 490.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) fax sent on behalf of candiadt
Full Name (Last, First, Middle Initial) National Republican Congressional Commit Mailing Address 320 First Street, S.E City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State DC C	Zip Code 20003 n Cycle-to-Date ▼	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional	l)	>	294.00
TOTAL This Period (last page this line num	ber only)		588.00

FOR LINE NUMBER: PAGE 47 / 105 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Southwestern Bell Telephone Company Date of Receipt Mailing Address P.O. Box 940012 12 27 2005 City State Zip Code Transaction ID: 60421.C6866 **Dallas** TX 75394-Amount of Each Receipt this Period FEC ID number of contributing C 5872.54 federal political committee. Offsets to Operating Expe-Name of Employer Occupation nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 5920.33 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	5872.54
TOTAL This Period (last page this line number only)	•	5872.54

0					
	CHEDULE B (FEC Form 3)		erate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 48 / 105
IT	EMIZED DISBURSEMENTS		category of the Summary Page	(Cricci on	
		Detailed	Summary rage		20a 20b 20c 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nan				
Λ	NAME OF COMMITTEE (In Full)				
17	Graves for Congress				
<u></u>	Full Name (Last, First, Middle Initial)				
A.	Lathrop & Gage, LLC.				Transaction ID: 60421.E2162 Date of Disbursement
	Mailing Address 2345 Grand Blvd				12
	City Kansas City	State MO	Zip Code 64108-2684		Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE LONG-DISTANCE COPIES			* *	196.43
	Candidate Name			Category/	Refund or Disposal of Excess Contributions Required Under
				Type	11 C.F.R. 400.53
		ement For:	Canaval		POSTAGE LONG-DISTANCE COP-
	Senate President	Primary Other (spe	General ecify)		IES
	State: District:		·- 57 •		
	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2044
В.	UMB Visa				Date of Disbursement
	Mailing Address 1010 Grand Blvd.				12 002 2005
	City	State	Zip Code		Amount of Each Disbursement this Period
	Kansas City	МО	64106-		310.04
	Purpose of Disbursement CREDIT CARD: SEE BELOW				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		ement For:			CREDIT CARD: SEE BELOW
	Senate President	Primary Other (spe	General		
	State: District:	_ Other (spe	Value of the second of the se		
	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2046
C.	Bullfeathers of Captial Hill				Date of Disbursement
	Mailing Address 410 1st St SE 1				10 26 2005
	City Washington	State DC	Zip Code 20003-		Amount of Each Disbursement this Period
	Purpose of Disbursement			•	25.51
	LUNCH MEETING W/ HOUSE MEMBER Candidate Name			Catanamil	Refund or Disposal of Excess Contributions Required Under
	Candidate Ivallie			Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburs	ement For:			[MEMO ITEM] MEMO: LUNCH MEETING W/ HO-
	Senate	Primary	General		USE MEMBER
	President State: District:	Other (spe	ecity) 🔻		
Г					
s	UBTOTAL of Disbursements This Page (optional)				506.47

·						
	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	rs fo	or each d	erate schedule(s) category of the Summary Page	(check only	NUMBER: PAGE 49 / 105 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports a for commercial purposes, other than usin					for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress					
Α.	Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st Street, S	S.E.				Transaction ID: 60421.E2045 Date of Disbursement M O M / D T 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Washington Purpose of Disbursement	Stat DC		Zip Code 20003-		Amount of Each Disbursement this Period
	GIFT FOR CONSITUENT Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Senate President State: District:		nt For: mary her (spe	General cify) ▼		MEMO: GIFT FOR CONSITUENT
В.	Full Name (Last, First, Middle Initial) U.S. House of Representatives Mailing Address U.S. Capitol					Transaction ID: 60421.E2048 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address U.S. Capitol City Washington	State DC		Zip Code 20515-		Amount of Each Disbursement this Period
	Purpose of Disbursement CONSTITUENT GIFT Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: Senate President State: District:		nt For: mary her (spe	General cify) ▼		[MEMO: TEM] MEMO: CONSTITUENT GIFT
C.	Full Name (Last, First, Middle Initial) U.S. House of Representatives					Transaction ID: 60421.E2047 Date of Disbursement
	Mailing Address U.S. Capitol					$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
	City Washington	Stat DC		Zip Code 20515-		Amount of Each Disbursement this Period 43.44
	Purpose of Disbursement CONSTITUENT GIFT Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: Senate President State: District:		nt For: mary her (spe	General cify) ▼		MEMO: CONSTITUENT GIFT
	IIRTOTAL of Dishursements This Page	(antin D)				0.00

SUBTOTAL of Disbursements This Page (optional)

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S	CHEDULE B (FI	ECForm 3)	Use sepe	erate schedule(s)	FOR LINE		PAGE 50 / 105
ΙΤ	EMIZED DISBU	RSEMENTS		category of the Summary Page	(check only	17 18 1	19a 19b 20c 21
	y Information copied from for commercial purposes						
\rangle	NAME OF COMMITTE Graves for Congress	` '					
Α.	Full Name (Last, First, M Shawna M. Pauley	Middle Initial)				Transaction ID: 604. Date of Disbursement	t
	Mailing Address 11	26 Elm Street				1 1 3 0	2005
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disb	
	Purpose of Disburseme SALARY	nt				Refund or Disposa	2000.00 al of Excess
	Candidate Name				Category/ Type	Contributions Req 11 C.F.R. 400.53	uired Under
		House Dis Senate President	sbursement For: Primary Other (spe	General cify) ▼		SALARY	
	State: Distr	rict:		·			
В.	Full Name (Last, First, MUMB Visa	Middle Initial)				Transaction ID: 604. Date of Disbursement	
	Mailing Address 10	10 Grand Blvd.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	2005		
	City Kansas City		State MO	Zip Code 64106-		Amount of Each Disb	ursement this Period
	Purpose of Disburseme				1299.46		
	CREDIT CARD: SEE B Candidate Name	BELOW			Category/ Type	Refund or Dispose Contributions Req 11 C.F.R. 400.53	
		Senate	sbursement For: Primary	General		CREDIT CARD: SE	E BELOW
	State: Distr	President rict:	Other (spe	city) 🔻			
C.	Full Name (Last, First, Mark Capitol Hill Club	 				Transaction ID: 604	
	Mailing Address 30	0 1st Street, S.E.				09 / 09	2005
	City Washington		State DC	Zip Code 20003-		Amount of Each Disb	ursement this Period
	Purpose of Disburseme FUNDRAISER	nt				Refund or Disposa	485.10
	Candidate Name				Category/ Type	Contributions Req 11 C.F.R. 400.53	
		House Dis Senate President	sbursement For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: FUNDRAIS	SER
_	State: Distr	rict:					
	IIRTOTAL of Dishursem	ionte Thie Dago (ont	ional)				3299.46

_		/FE0 F							
		(FEC Form 3	- 1	Use sepe	erate schedule(s)	_	LINE ck only	NUMBER:	PAGE 51 / 105
ΙT	EMIZED DIS	BURSEMEN'	TS	for each category of the Detailed Summary Page		(CHEC	Ĺ	17 18	19a 19b 20c 21
								or the purpose of solication contributions from su	
\rangle	NAME OF COMM Graves for Con	, ,							
Α.	Full Name (Last, F DC Crandon Go	olf Course						Transaction ID: 604 Date of Disbursemen	-
	Mailing Address	6700 Crandon E	Blvd 					1 1 0 5	2005
	City Key Biscayne		St F	tate L	Zip Code 33149-			Amount of Each Disb	
	Purpose of Disbur GOLF FUNDRAIS							Refund or Dispos	466.50
	Candidate Name								quired Under
	Office Sought:	House Senate President		nent For: Primary Other (spe	General ecify) ▼	, , , , , , , , , , , , , , , , , , ,		[MEMO ITEM] MEMO: GOLF FUN	NDRAISIER
	State:	District:			•				
В.	Full Name (Last, F Stefanos Wine	,						Transaction ID: 604 Date of Disbursemen	t
	Mailing Address 24 Crandon Blvd							1 1 1 0 4 7 2 0 0 5 Y	2005
	City Key Biscayne			tate L	Zip Code 33149-			Amount of Each Disb	
	Purpose of Disbursement								296.10
	DRINKS FOR FUNDRAISER Candidate Name						y/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:	House Senate President		nent For: Primary Other (spe	General			[MEMO ITEM] MEMO: DRINKS F ER	OR FUNDRAIS-
	State:	District:		other (spe	ecity) 🔻				
C.	Full Name (Last, F UMB Visa	irst, Middle Initial)						Transaction ID: 604 Date of Disbursemen	
	Mailing Address	1010 Grand Blv	d.					111 / 07	2005
	City Kansas City			tate 10	Zip Code 64106-			Amount of Each Disb	ursement this Period
	Purpose of Disbursement FINANCE CHARGE						12.7 Refund or Disposal of Excess		
	Candidate Name					Category Type	y/	Contributions Rec	_l uired Under
	Office Sought:	House Senate President		nent For: Primary Other (spe	General ecify) ▼			[MEMO ITEM] MEMO: FINANCE	CHARGE
_	State:	District:							
	LIRTOTAL of Dich	ireamente This Page	(ontional)						0.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS				FOR LINE (check onl	NUMBER: PAGE 52 / 105 y one) X 17
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				
abla	NAME OF COMMITTEE (In Full)				
$ \rangle$	Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) UMB Visa Mailing Address 1010 Grand Blvd.				Transaction ID: 60421.E2042 Date of Disbursement M M M / D D D / Y Y Y O O D S
		State Zip Code			Amount of Each Disbursement this Period
	Kansas City	MO 64106-			39.00
	Purpose of Disbursement LATE CHARGE				Refund or Disposal of Excess
	Candidate Name		C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary General Other (specify) \(\psi\)	d	71	[MEMO ITEM] MEMO: LATE CHARGE
	State: District:				
В.	Full Name (Last, First, Middle Initial) Mail Solutions, Inc.				Transaction ID: 60421.E2174 Date of Disbursement
	Mailing Address 1441 Atlantic Ave				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Kansas City	State Zip Code MO 64116-			Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING	• •	725.00		
	Candidate Name			ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary Genera Other (specify) ▼	ıl		MAILING
	State: District:				
C.	Full Name (Last, First, Middle Initial) Shawn Graybill				Transaction ID: 60421.E2195 Date of Disbursement
	Mailing Address 4443 NE 83rd Terr				$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 2^{M} & \begin{smallmatrix} M \\ \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 2^{D} \\ \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0^{Y} 5^{Y} \\ \end{smallmatrix}$
	City Kansas City	State Zip Code MO 64119-			Amount of Each Disbursement this Period
	Purpose of Disbursement		Tr	-	2500.00
	SALARY Candidate Name		- C	ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate	ement For: Primary Genera	 .l	71	SALARY
	President State: District:	Other (specify) ▼			
s	UBTOTAL of Disbursements This Page (optional)			▶	3225.00

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each o	erate schedule(s) category of the Summary Page	(check only	NUMBER: PAGE 53 / 105 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) David P. Williams Mailing Address 1554 Canterbury Lane				Transaction ID: 60421.E2158 Date of Disbursement 1 1
		State MO	Zip Code 64068-		Amount of Each Disbursement this Period 2979.29
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼		CAMPAIGN OFFICE RENT/UTIL- ITIES
В.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.				Transaction ID: 60421.E2186 Date of Disbursement
	Mailing Address 400 W. Covina Blvd.		12 M / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	San Dimas	State CA	Zip Code 91773-		Amount of Each Disbursement this Period 990.36
	Purpose of Disbursement PAYROLL EXPENSE Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General cify) ▼		PAYROLL EXPENSE
C.	Full Name (Last, First, Middle Initial) UMB Visa				Transaction ID: 60421.E2012 Date of Disbursement
	Mailing Address 1010 Grand Blvd.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix} $
	Kansas City	State MO	Zip Code 64106-		Amount of Each Disbursement this Period 870.34
	Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary Other (spe	General cify) ▼		CREDIT CARD: SEE BELOW
	State: District:				4000.00
S	UBTOTAL of Disbursements This Page (optional)				4839.99

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	CHEDULE B (FEC Form 3)	Use sepera	ate schedule(s)		NUMBER: PAGE 54 / 105
ITEMIZED DISBURSEMENTS		for each category of the		(check only	χ 17
		Detailed St	ımmary Page		20a 20b 20c 21
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				
Λ	NAME OF COMMITTEE (In Full)				
17	Graves for Congress				
<u></u>	Full Name (Last, First, Middle Initial)				T ID 00404 50045
A.	Federal Express Shipping				Transaction ID: 60421.E2015 Date of Disbursement
	Mailing Address PO Box 94515				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & S \\ I & I & O & I \end{bmatrix} $
	City Palatine		Zip Code 60094-		Amount of Each Disbursement this Period
	Purpose of Disbursement SHIPPING CHARGES			• •	39.66 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		Турс	[MEMO ITEM]
	Senate	Primary	General		MEMO: SHIPPING CHARGES
	President	Other (speci	fy) 🔻		
	State: District:				
В.	Full Name (Last, First, Middle Initial) Federal Express Shipping				Transaction ID: 60421.E2024 Date of Disbursement
	Mailing Address PO Box 94515				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
	City Palatine		Zip Code 60094-		Amount of Each Disbursement this Period
	Purpose of Disbursement	IL	00094-		19.83
	SHIPPING CHARGES		Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Disburse Senate	ement For: Primary	General		MEMO: SHIPPING CHARGES
	President	Other (speci	fy) 🔻		
	State: District: Full Name (Last, First, Middle Initial)				
C.	Federal Express Shipping				Transaction ID: 60421.E2031 Date of Disbursement
	Mailing Address PO Box 94515				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
	City Palatine		Zip Code 60094-		Amount of Each Disbursement this Period
	Purpose of Disbursement			-	19.83
	SHIPPING CHARGES				Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		7F -	[MEMO ITEM]
	Senate	Primary	General		MEMO: SHIPPING CHARGES
	President State: District:	Other (speci	fy) 🔻		
	· · · · · · · · · · · · · · · · · · ·				0.00
S	UBTOTAL of Disbursements This Page (optional)				0.00

	CHEDULE B (FEC Form EMIZED DISBURSEME	-	for each	erate schedule(s) category of the Summary Page	_	NE NUMBER: PAGE 55 / 105 only one)
			ents may n	not be sold or used		20a 20b 20c 21 on for the purpose of solicating contributions
or	NAME OF COMMITTEE (In Full)	using the name	e and addre	ess of any political	committee to	solicit contributions from such committee
\rangle	Graves for Congress					
Α.	Full Name (Last, First, Middle Initia Hy-Vee Foods					Transaction ID: 60421.E2017 Date of Disbursement 0 9 1 9 2 0 0 5
	Mailing Address 1332 H 152	Highway				09 19 2005
	City Liberty		State MO	Zip Code 64068-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD FOR EVENT					44.01 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Senate President State: District:	Disburse	ment For: Primary Other (spe	General ecify) ▼		MEMO: FOOD FOR EVENT
_	Full Name (Last, First, Middle Initia					
В.		')				Transaction ID: 60421.E2014 Date of Disbursement
	Mailing Address 1332 H 152	Highway				0 9 M / D D / Y 2 0 0 5 Y
	City Liberty		State MO	Zip Code 64068-		Amount of Each Disbursement this Period
	Purpose of Disbursement CLEANING SUPPLIES					31.10 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General		MEMO: CLEANING SUPPLIES
	State: District:			•		
C.	Full Name (Last, First, Middle Initia Office Depot	1)				Transaction ID: 60421.E2018 Date of Disbursement
	Mailing Address 8501 North	Evanston Ave	enue			09
	City Kansas City		State MO	Zip Code 64157-		Amount of Each Disbursement this Period
	Purpose of Disbursement	25.77				
	OFFICE SUPPLIES Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General	. , , po	MEMO: OFFICE SUPPLIES
	State: District:		, , , _F	• •		
s	SUBTOTAL of Disbursements This F	Page (optional) .				0.00

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	CHEDULE B (FEC Form :	- I		erate schedule(s)	FOR LIN	E NUMBER: PAGE 56 / 105	_
IT	EMIZED DISBURSEMEN	TS		category of the Summary Page	(Oncore of	X 17	
						n for the purpose of solicating contributions solicit contributions from such committee	
\setminus	NAME OF COMMITTEE (In Full) Graves for Congress						
\mathbb{Z}							
A.	Full Name (Last, First, Middle Initial) Travel Tyme					Transaction ID: 60421.E2027 Date of Disbursement	
	Mailing Address 1904 Clay Stre	et				10 M / D 5 / Y 2 0 0 5 Y	
	City Chillicothe		tate 10	Zip Code 64601-		Amount of Each Disbursement this Period	7
	Purpose of Disbursement AIRFARE					Refund or Disposal of Excess	_
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Senate President		nent For: Primary Other (spe	General		MEMO: AIRFARE	
	State: District:		\ 1	<i>→</i>			
В.	Full Name (Last, First, Middle Initial) Travel Tyme					Transaction ID: 60421.E2026 Date of Disbursement	
	Mailing Address 1904 Clay Stre	et				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City Chillicothe		tate 10	Zip Code 64601-		Amount of Each Disbursement this Period	_
	Purpose of Disbursement AIRFARE		115.20 Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	00.53			
	Office Sought: House Senate President	1	nent For: Primary Other (spe	General cify) ▼		MEMO: AIRFARE	
	State: District:						
C.	Full Name (Last, First, Middle Initial) Travel Tyme					Transaction ID: 60421.E2028 Date of Disbursement	
	Mailing Address 1904 Clay Stre	et				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City Chillicothe		tate 10	Zip Code 64601-		Amount of Each Disbursement this Period	_
	Purpose of Disbursement AGENT FEE					20.00 Refund or Disposal of Excess	_
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Senate President		nent For: Primary Other (spe	General		MEMO: AGENT FEE	
	State: District:		(500	- J/ ♥			_
s	UBTOTAL of Disbursements This Page	e (optional)			<u> </u>	0.00	

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 57 / 1 (check only one)		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21	
Any Information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)	<u>, , , , , , , , , , , , , , , , , , , </u>			
Graves for Congress				
Full Name (Last, First, Middle Initial) 1. Travel Tyme			Transaction ID: 60421.E2029 Date of Disbursement	
Mailing Address 1904 Clay Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 & M \end{smallmatrix} & \begin{smallmatrix} I & D & D \\ I & 0 & D \end{smallmatrix} & \begin{smallmatrix} I & Y & Y & Y & Y \\ I & 0 & 0 & D \end{bmatrix}$	
City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period	
Purpose of Disbursement AGENT FEE			20.00 Refund or Disposal of Excess	
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Senate President	rsement For: Primary General Other (specify)		MEMO: AGENT FEE	
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 60421 E2020	
3. Travel Tyme			Transaction ID: 60421.E2020 Date of Disbursement	
Mailing Address 1904 Clay Street			09 7 21 7 2005	
City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period	
Purpose of Disbursement AGENT FEE		20.00 Refund or Disposal of Excess		
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: House Senate President State: District:	rsement For: Primary General Other (specify)		MEMO: AGENT FEE	
Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60421.E2019 Date of Disbursement	
Mailing Address 1904 Clay Street			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{smallmatrix} 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} O \end{smallmatrix} \begin{smallmatrix} Y \end{smallmatrix} \begin{bmatrix} Y \\ 3 \end{smallmatrix} $	
City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period	
Purpose of Disbursement AIRFARE	•	93.40 Refund or Disposal of Excess		
Candidate Name				
Office Sought: House Senate President State: District:	rsement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: AIRFARE	
SUBTOTAL of Disbursements This Page (optional	ın		0.00	
SOBTOTAL OF DISDUISCINCING THIS Fage (Optional	u) ·····	·······		

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	_	NUMBER: PAGE 58 / 105
IT	EMIZED DISBURSEMENTS	for each category of the	(Crieck onli	y one)
		Detailed Summary Page		20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
Ν	NAME OF COMMITTEE (In Full)			
/	Graves for Congress			
<u></u>	Full Name (Last, First, Middle Initial)			Transaction ID: 60421,E2030
A.	Travel Tyme			Date of Disbursement
	Mailing Address 1904 Clay Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State Zip Code MO 64601-		Amount of Each Disbursement this Period
	Purpose of Disbursement	0+001-		20.00
	AGENT FEE			Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse	ement For:	туре	[MEMO ITEM]
	Senate	Primary General		MEMO: AGENT FEE
	President State: District:	Other (specify)		
	Full Name (Last, First, Middle Initial)			T ID 00404 F0405
В.	The Salvation Army			Transaction ID: 60421.E2165 Date of Disbursement
	Mailing Address 4300 N.F. Parvin Road	12 01 YYYY Y 1		
	Mailing Address 4300 N.E. Parvin Road			
	City Kansas City	State Zip Code MO 64117-		Amount of Each Disbursement this Period
	Purpose of Disbursement		1000.00	
	CHARITABLE DONATION		Refund or Disposal of Excess	
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate	ement For: Primary General		CHARITABLE DONATION
	President	Other (specify)		
	State: District:			
C.	Full Name (Last, First, Middle Initial) National Republican Congressional Comm	it		Transaction ID: 60421.C6774IK Date of Disbursement
	Mailing Address 320 First Street, S.E.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
		State Zip Code DC 20003-		Amount of Each Disbursement this Period
	Purpose of Disbursement			98.00
	FAX SENT ON BEHALF OF CANDIDAT		0.1	Refund or Disposal of Excess Contributions Required Under
	Candidate Name		Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		IN KIND: FAX SENT ON BEHA-
	Senate	Primary General		LF OF CANDIDAT
	State: President State:	Other (specify)		
	<u> </u>			1000.00
s	UBTOTAL of Disbursements This Page (optional)			1098.00

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 59 / 105 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2199 Sarah N. Bowles Date of Disbursement 0 1 2005 Mailing Address 10231 N. Cherry Dr. City State Zip Code Amount of Each Disbursement this Period MO 64155-Kansas City 2500.00 Purpose of Disbursement SALARY Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **SALARY** General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60421.C6776IK National Republican Congressional Commit Date of Disbursement 0 2 2005 Mailing Address 320 First Street, S.E. City State Zip Code Amount of Each Disbursement this Period Washington 20003-DC 98.00 Purpose of Disbursement FAX SEND ON BEHALF OF CANDIDAT Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: IN KIND: FAX SEND ON BEHA-LF OF CANDIDAT Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2178 C. Automatic Data Processing, Inc. Date of Disbursement 2005 Mailing Address 400 W. Covina Blvd. City State Zip Code Amount of Each Disbursement this Period San Dimas CA 91773-31.00 Purpose of Disbursement PROCESSING FEES Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: PROCESSING FEES Senate Primary General President Other (specify) State: District: 2629.00 SUBTOTAL of Disbursements This Page (optional) ...

	CHEDULE B (FEC Form 3)	Use seperat	te schedule(s)	FOR LINE (check only	NUMBER: PAGE 60 / 105	
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		l ` <u>-</u>	X 17	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name					
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress					
Α.	Full Name (Last, First, Middle Initial) UMB Visa				Transaction ID: 60421.E2049 Date of Disbursement	
	Mailing Address 1010 Grand Blvd.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{bmatrix} \end{bmatrix}$	
	City Kansas City		Zip Code 64106-		Amount of Each Disbursement this Period	
	Purpose of Disbursement CREDIT CARD: SEE BELOW			•	5591.61 Refund or Disposal of Excess	
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify	General y) ▼		CREDIT CARD: SEE BELOW	
	State: District:					
В.	Full Name (Last, First, Middle Initial) Ace Blue Waters Charters				Transaction ID: 60421.E2062 Date of Disbursement	
	Mailing Address 401 Biscayne Blvd				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$	
	•		Zip Code 33132-		Amount of Each Disbursement this Period	
	Purpose of Disbursement FUNDRAISER			882. Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify	General		[MEMO ITEM] MEMO: FUNDRAISER	
	State: District:] (-p	,, v			
C.	Full Name (Last, First, Middle Initial) Ace Blue Waters Charters				Transaction ID: 60421.E2086 Date of Disbursement	
	Mailing Address 401 Biscayne Blvd				$\begin{bmatrix}\begin{smallmatrix}M\\1&1\end{smallmatrix}\end{bmatrix}^M \begin{smallmatrix}D\\0&8\end{smallmatrix} \begin{smallmatrix}Y\\2&0&0&5\end{smallmatrix}$	
			Zip Code 33132-		Amount of Each Disbursement this Period	
	Purpose of Disbursement				231.00	
	FUNDRAISER Candidate Name	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify	General	Туре	[MEMO: FUNDRAISER	
	State: District:		·/ V			
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Gummary Page	(check only	NUMBER: PAGE 61 / 105 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and St for commercial purposes, other than using the				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) Barry Point 66 Mailing Address 9795 NE Barry Road				Transaction ID: 60421.E2082 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Kansas City Purpose of Disbursement GAS Candidate Name Office Sought: House Senate President	State MO ursement For: Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 19.67 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: GAS
В.	State: District: Full Name (Last, First, Middle Initial) Federal Express Shipping				Transaction ID: 60421.E2084 Date of Disbursement
	Mailing Address PO Box 94515				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Palatine Purpose of Disbursement SHIPPING CHARGES Candidate Name	State IL	Zip Code 60094-	Category/ Type	Amount of Each Disbursement this Period 15.42 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ursement For: Primary Other (spec	General cify) ▼	1) po	[MEMO ITEM] MEMO: SHIPPING CHARGES
C.	Full Name (Last, First, Middle Initial) Federal Express Shipping				Transaction ID: 60421.E2085 Date of Disbursement 1 1 0 6 2 0 0 5
	Mailing Address PO Box 94515 City Palatine	State IL	Zip Code 60094-		Amount of Each Disbursement this Period
	Purpose of Disbursement SHIPPING CHARGES Candidate Name Office Sought: House Senate President	ursement For: Primary Other (spec	General	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
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	y Information copied from such for commercial purposes, other											
Λ	NAME OF COMMITTEE (In I	=ull)										
\mathbb{Z}	Graves for Congress											
Α.	Full Name (Last, First, Middle Federal Express Shipping	,					Transaction ID: 60421.E2064 Date of Disbursement					
								M M / D D / Y Y Y Y				
	Mailing Address PO Box	94515					10 24 2005					
	City Palatine		State IL	Zip Code 60094-			Amount of Each Disbursement this Period					
	Purpose of Disbursement SHIPPING CHARGES					•	L					20.27
	Candidate Name Category/							ontribu	ıtions	sposal Requ		
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	Office Sought: House Senate		ement For: Primary	General			MEM			ING (CHAF	RGES
	Presid	_	Other (sp									
	State: District:											
В.	•	Name (Last, First, Middle Initial)								6042	1.E20	060
Ь.	Office Depot						Date of	of Disk м /			Υ	Y Y Y
	Mailing Address 8501 North Evanston Avenue						10 19 / 2005			ž 0 0 5 °		
	City Kansas City		State MO	Zip Code 64157-			Amou	nt of E	Each	Disbui	seme	nt this Period
	Purpose of Disbursement OFFICE SUPPLIES						16.64 Refund or Disposal of Excess					
						ategory/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House	Disburs	sement For:			.) 0	[MEM		_		ו וחם	EC.
	Senate	· -	Primary	General			IVICIVI	J. Or	FIC	,E 30	FFLII	ES
	State: Presid	ent	Other (sp	ecity) 🔻								
	Full Name (Last, First, Middle	Initial)					Trans	actio	n ID:	6042	1 F2(156
C.	Office Depot						Date	of Disk	ourse	ement		
	Mailing Address 8501 North Evanston Avenue						$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 0^{M} & \begin{smallmatrix} M \\ \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 1 \end{smallmatrix} 1 & \begin{smallmatrix} D \\ 6 \end{bmatrix} & \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 2 & 0 & 0 & 5 \end{bmatrix}^{Y}$			Ž 0 Ö 5 Š		
	City		State	Zip Code			Amou	nt of E	Each	Disbu	seme	nt this Period
	Kansas City		МО	64157-				-				34.11
	Purpose of Disbursement OFFICE SUPPLIES						Refund or Disposal of Excess					
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	· -	ce Sought: House Disbursement For:					MEMO: OFFICE SUPPLIES		ES			
	Senate Presid		Primary	General		IVILIVIO. OI I IOL SUFFLIE						
	State: District:	CIII.	Other (sp	ecity) ♥								
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate for each cate Detailed Sum	gory of the	(check only	NUMBER: PAGE 63 / 105 / one) X 17
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				or the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
Α.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 8501 North Evanston Av	enue			Transaction ID: 60421.E2052 Date of Disbursement
	Kansas City Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: House Senate President		General	Category/ Type	Amount of Each Disbursement this Period 151.44 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
В.	State: District: Full Name (Last, First, Middle Initial) Office Depot Mailing Address 8501 North Evanston Av	enue			Transaction ID: 60421.E2066 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Kansas City Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: House Senate President State: District:		General	Category/ Type	Amount of Each Disbursement this Period 3.85 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
C.	Full Name (Last, First, Middle Initial) Signature Wine Cellars Mailing Address 2536 Barrington Ct City Hayward Purpose of Disbursement FUNDRAISING GIFTS Candidate Name Office Sought: House Senate President		General	Category/ Type	Transaction ID: 60421.E2071 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: District:				0.00
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	CHEDULE B (FEC Form 3	-		rate schedule(s)	FOR LINE (check only			
IT	EMIZED DISBURSEMENT		for each category of the Detailed Summary Page		_ i `	X 17		
	y Information copied from such Reports ar for commercial purposes, other than using							
\setminus	NAME OF COMMITTEE (In Full)							
	Graves for Congress							
A.	Full Name (Last, First, Middle Initial) The UPS Store					Transaction ID: 60421.E2055 Date of Disbursement		
	Mailing Address 844 S M-291 Hw	1 0 M / D 1 5 / Y 2 0 0 5 Y						
	City Liberty	Sta M	ate O	Zip Code 64068-		Amount of Each Disbursement this Period		
	Purpose of Disbursement COPIES					5.60 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Senate President		ent For: Primary Other (spec	General		MEMO: COPIES		
	State: District:							
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60421.E2051		
B.	Travel Tyme					Date of Disbursement		
	Mailing Address 1904 Clay Street		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix} $					
	City	Sta M	ate	Zip Code 64601-		Amount of Each Disbursement this Period		
	Chillicothe Purpose of Disbursement CREDIT FOR AGENT FEE		-20.00					
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ent For: Primary Other (spec	General		[MEMO ITEM] MEMO: CREDIT FOR AGENT FEE		
	State: District:		(-1	, J, ,				
C.	Full Name (Last, First, Middle Initial) Travel Tyme					Transaction ID: 60421.E2070 Date of Disbursement		
	Mailing Address 1904 Clay Street					$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}0&M\end{smallmatrix} \ \begin{smallmatrix}D\\2\end{smallmatrix}2&8\end{smallmatrix} \ \begin{smallmatrix}Y\\2\end{smallmatrix}0&0\\5\\5\end{smallmatrix}$		
	City Chillicothe	Sta M	ate O	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AGENT FEE					20.00 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ent For: Primary Other (spec	General		[MEMO ITEM] MEMO: AGENT FEE		
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5	SCHEDULE B (FEC Form 3			Use seperate scriedule(s)					E NUMBER: PAGE 65		
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\setminus	NAME OF COM	/ITTEE (In Full)									
\rangle	Graves for Cor	ngress									
_	Full Name (Last,	First, Middle Initial)						Transaction ID: 60	421.E207	72	
Α.	Travel Tyme							Date of Disburseme			
	Mailing Address 1904 Clay Street							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City			State	Zip Code			Amount of Each Dis	bursement	t this Period	
	Chillicothe			МО	64601-					385.20	
	Purpose of Disbursement AIRFARE							Refund or Dispo	sal of Exce	ess	
	Candidate Name						ategory/	Contributions Required Under			
	Office Sought:	House	Diahuraa	ment For:			Туре	[MEMO ITEM]	•		
	Office Sought.	Senate	Disburse	Primary	General			MEMO: AIRFARE			
		President		Other (spe	ecify)						
	State:	District:									
	•	First, Middle Initial)		Transaction ID: 60	421.E206	69					
B.	Travel Tyme							Date of Disburseme			
	Mailing Address 1904 Clay Street							10 28	2	005	
	City Chillicothe			State MO	Zip Code 64601-			Amount of Each Dis	bursement	t this Period	
	Purpose of Disbursement									20.00	
	AGENT FEE							Refund or Dispo			
	Candidate Name	didate Name Category/						Contributions Required Under 11 C.F.R. 400.53			
	Office Sought:	House	Disburse	ment For:			Турс	[MEMO ITEM]			
	omoo coagm.	Senate	Biobaico	Primary	General			MEMO: AGENT F	EE		
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C.	Full Name (Last, I Travel Tyme	First, Middle Initial)						Transaction ID: 60-		73	
	Mailing Address	1004 01 04	.1					11 02	/ Y Y 2	005	
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	City Chillicothe			State MO	Zip Code 64601-			Amount of Each Dis	bursement	t this Period	
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	AIRFARE							Refund or Dispo			
	Candidate Name						ategory/ Type	Contributions Re		der	
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		Senate		Primary	General						
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		Use seperate schedule(s)				OR LINE check only	NUMBER: PAGE 66 / 105	_		
IT	EMIZED DISBU	JRSEMENTS	for o	for each category of the Detailed Summary Page			· ·	X 17 18 19a 19b 20a 20b 20c 21		
								or the purpose of solicating contributions icit contributions from such committee		
\setminus	NAME OF COMMITT	EE (In Full)								
$ \rangle$	Graves for Congres	SS								
Α.	Full Name (Last, First, Travel Tyme	Middle Initial)						Transaction ID: 60421.E2068 Date of Disbursement		
	Mailing Address 1904 Clay Street							10 M / 28 / Y 2005		
	City Chillicothe		State MO		Zip Code 64601-			Amount of Each Disbursement this Period		
	Purpose of Disbursem	ent	IVIO		04001-	•	-	770.40		
	AIRFARE Candidate Name					Cate		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought:	House [Senate President	Disbursement I Prima Othe	ary	General			[MEMO ITEM] MEMO: AIRFARE		
	State: Dis	trict:								
В.	Full Name (Last, First, Middle Initial) Travel Tyme							Transaction ID: 60421.E2074 Date of Disbursement		
	Mailing Address 1	904 Clay Street						$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 0 & 5 \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$		
	City Chillicothe		State MO		Zip Code 64601-			Amount of Each Disbursement this Period	_	
	Purpose of Disbursement AIRFARE							770.40 Refund or Disposal of Excess		
	Candidate Name Categor Type							Contributions Required Under 11 C.F.R. 400.53		
	Office Sought:	Senate President	Disbursement I Prima Othe	ary	General			[MEMO ITEM] MEMO: AIRFARE		
		trict:								
C.	Full Name (Last, First, Travel Tyme	Middle Initial)						Transaction ID: 60421.E2080 Date of Disbursement		
	Mailing Address 1904 Clay Street							$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & D & D & S \end{smallmatrix} \end{bmatrix}$		
	City Chillicothe		State MO		Zip Code 64601-			Amount of Each Disbursement this Period	7	
	Purpose of Disbursem	ent				·		20.00 Refund or Disposal of Excess	_	
	Candidate Name					Cate	egory/ rpe	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought:	House [Senate President	Disbursement I Prima Othe	ary	General cify) ▼			[MEMO ITEM] MEMO: AGENT FEE		
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	CHEDULE B (FEC Fo	-	Use sep	erate schedule(s)		NUMBER: PAGE 67 / 105		
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						for the purpose of solicating contributions olicit contributions from such committee		
\setminus	NAME OF COMMITTEE (In Full)						
$ \rangle$	Graves for Congress							
Α.	Full Name (Last, First, Middle Ini Travel Tyme		Transaction ID: 60421.E2079 Date of Disbursement					
	Mailing Address 1904 Clay	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AGENT FEE	0 0	20.00 Refund or Disposal of Excess					
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ement For: Primary Other (spe	General	. ,,,,,	[MEMO ITEM] MEMO: AGENT FEE		
	State: District:			, ,				
В.	Full Name (Last, First, Middle Ini Travel Tyme	Transaction ID: 60421.E2075 Date of Disbursement						
	Mailing Address 1904 Clay	Street				$ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 2 & M \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$		
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE		133.70 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President		ement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: AIRFARE		
	State: District:							
C.	Full Name (Last, First, Middle Ini Travel Tyme	tial)				Transaction ID: 60421.E2076 Date of Disbursement		
	Mailing Address 1904 Clay	Street				111 02 7 2005		
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE	159.20 Refund or Disposal of Excess						
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		ement For: Primary Other (spe	General ecify) ▼	···	[MEMO ITEM] MEMO: AIRFARE		
_	State: District:			<u> </u>				
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	CHEDULE B (FEC Form 3)	' Use seperate schedule(s)			NUMBER: PAGE 68 / 105		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
Λ	NAME OF COMMITTEE (In Full)						
/	Graves for Congress						
<u>/</u>	Full Name (Last, First, Middle Initial)				Transaction ID: 604	21 F2077	
A.	Travel Tyme				Date of Disbursement		
	Mailing Address 1904 Clay Street		$\begin{bmatrix} \begin{smallmatrix} M & M \end{smallmatrix} & \begin{smallmatrix} M & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 1 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ D & D & D \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} $				
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		State Zip Co MO 6460			Amount of Each Disb	ursement this Period	
	Purpose of Disbursement AGENT FEE			20.00			
	Candidate Name			Category/	Refund or Disposations Reg		
			ľ	Type	11 C.F.R. 400.53		
	Office Sought: House Disburse				[MEMO ITEM] MEMO: AGENT FE	Ε	
	Senate President	Primary Other (specify)	General ,				
	State: District:	Carlor (opcony)					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 604	21.E2067	
В.	Travel Tyme				Date of Disbursemen		
	Mailing Address 1904 Clay Street		10 10 28 7 2005	2005			
		State Zip Co			Amount of Each Disb	ursement this Period	
	Chillicothe Purpose of Disbursement		507.40				
	AIRFARE		Refund or Disposa				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse		 		[MEMO ITEM] MEMO: AIRFARE		
	Senate President	Primary Other (specify)	General ,				
	State: District:	Other (specify)					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 604	21.E2058	
C.	Travel Tyme				Date of Disbursemen		
	Mailing Address 1904 Clay Street				10 / 18	2005	
		State Zip Co MO 6460			Amount of Each Disb	ursement this Period	
	Purpose of Disbursement AIRFARE				Refund or Disposa	159.20	
	Candidate Name			Category/	Contributions Req 11 C.F.R. 400.53		
	Office Sought: House Disburse	ment For:		71 -	[MEMO ITEM] MEMO: AIRFARE		
	Senate	,	General		IVILIVIO. AINFAÑE		
	State: President State:	Other (specify)	•				
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s	UBTOTAL of Disbursements This Page (optional) .					0.00	

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\setminus	NAME OF COMMITTEE (In Full)						
/	Graves for Congress						
<u>/</u>	Full Name (Last, First, Middle Initial)				Transaction ID: 604	21 F2078	
A.	Travel Tyme				Date of Disbursemen		
	Mailing Address 1904 Clay Street				1 1 0 2	2005	
		State Zip Co MO 6460			Amount of Each Disb	ursement this Period	
	Purpose of Disbursement	0460	ı- 			20.00	
	AGENT FEE				Refund or Dispos		
	Candidate Name	Category/	Contributions Red	luired Under			
	Office Sought: House Disburse	mont For:		Туре	[MEMO ITEM]		
	Senate Disburse		ieneral		MEMO: AGENT FE	ΞE	
	President	Other (specify)					
	State: District:						
В.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 604		
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	Mailing Address 1904 Clay Street		10				
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	CREDIT FOR AIRFARE		Refund or Dispos	al of Excess			
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse				[MEMO ITEM] MEMO: CREDIT FO	OR AIRFARF	
	Senate President	Primary G Other (specify) ▼	ieneral				
	State: District:	Other (specify)					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 604	21.E2059	
C.	Travel Tyme				Date of Disbursemen		
	Mailing Address 1904 Clay Street				10 / 18	2005	
		State Zip Co MO 6460			Amount of Each Disb	ursement this Period	
	Purpose of Disbursement AGENT FEE			•	20.00 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Red 11 C.F.R. 400.53		
	Office Sought: House Disburse		I		[MEMO ITEM] MEMO: AGENT FE	=F	
	Senate President	,	ieneral				
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	y Information copied from such Reports and State or commercial purposes, other than using the nar							
\setminus	NAME OF COMMITTEE (In Full)							
	Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) USPS-Liberty			Date of Disbursem	Transaction ID: 60421.E2065 Date of Disbursement			
	Mailing Address 1000 Progress Dr			10 25	2005			
	City Liberty	State Zip Code MO 64068-		Amount of Each Disbursement this Period				
	Purpose of Disbursement POSTAGE				185.00 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions R 11 C.F.R. 400.9 [MEMO ITEM]				
	Senate President	sement For: Primary General Other (specify) ▼		MEMO: POSTAC	ЭE			
	State: District:							
В.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60 Date of Disbursem	ent			
	Mailing Address 1010 Grand Blvd.	12 19	2005					
	City Kansas City		Amount of Each Di	isbursement this Period				
	Purpose of Disbursement CREDIT CARD: SEE BELOW				3495.50 Refund or Disposal of Excess Contributions Required Under			
	Candidate Name	Category/ Type	Contributions R					
	Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		CREDIT CARD:	SEE BELOW			
— С.	Full Name (Last, First, Middle Initial) DAgge Florist			Transaction ID: 60	•			
	Mailing Address 18 East Franklin	12 0 1 0 1						
	City Liberty	State Zip Code MO 64068-		Amount of Each Di	isbursement this Period			
	Purpose of Disbursement GIFS FOR CAMPAIGN EVENT HOST		Refund or Disp	53.68 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions R				
	Senate President	sement For: Primary General Other (specify) ▼		MEMO: GIFS FC EVENT HOST	OR CAMPAIGN			
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 17
		v any person for the purpose of solicating contributions mmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Graves for Congress		
Full Name (Last, First, Middle Initial) A. Federal Express Shipping Mailing Address PO Box 94515		Transaction ID: 60421.E2097 Date of Disbursement 111
City Palatine Purpose of Disbursement SHIPPING CHARGES Candidate Name Office Sought: House Senate President	State Zip Code IL 60094- Ursement For: Primary General Other (specify)	Amount of Each Disbursement this Period 20.42 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
State: District: Full Name (Last, First, Middle Initial) Federal Express Shipping Mailing Address PO Box 94515		Transaction ID: 60421.E2110 Date of Disbursement 111
City Palatine Purpose of Disbursement SHIPPING CHARGES Candidate Name Office Sought: House Senate President State: District:	State Zip Code IL 60094- Ursement For: Primary General Other (specify)	Amount of Each Disbursement this Period 23.06 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
Full Name (Last, First, Middle Initial) Federal Express Shipping Mailing Address PO Box 94515 City Palatine Purpose of Disbursement SHIPPING CHARGES Candidate Name	State Zip Code IL 60094- Ursement For: Primary General Other (specify)	Transaction ID: 60421.E2144 Date of Disbursement M M M D D D D D D D D D D D D D D D D
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Λ	NAME OF COMMITTEE (In Full)							
V	Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) Hy-Vee Foods			Transaction ID: 60421.E2124 Date of Disbursement				
	Mailing Address 1332 H 152 Highway		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City	State Zip Code		Amount of Each Disbursement this Period				
	Liberty Purpose of Disbursement	MO 64068-		5.98				
	CLEANING SUPPLIES		Refund or Disposal of Excess					
	Candidate Name	Category/	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disb	ursement For:	Туре	[MEMO ITEM]				
	Senate	Primary General		MEMO: CLEANING SUPPLIES				
	President	Other (specify)						
_	State: District:							
В.	Full Name (Last, First, Middle Initial) Office Depot			Transaction ID: 60421.E2107				
				Date of Disbursement				
	Mailing Address 8501 North Evanston	Avenue		111 / 15 / 2005				
	City Kansas City	State Zip Code MO 64157-		Amount of Each Disbursement this Period				
	Purpose of Disbursement OFFICE SUPPLIES	* *	54.65 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	9 🗎	ursement For:		[MEMO ITEM] MEMO: OFFICE SUPPLIES				
	Senate President	Primary General Other (specify)						
	State: District:	Other (specify)						
_	Full Name (Last, First, Middle Initial)			Transaction ID: 60421.E2111				
C.	Office Depot			Date of Disbursement				
	Mailing Address 8501 North Evanston	Avenue		111 / 18 / 2005				
	City Kansas City	State Zip Code MO 64157-		Amount of Each Disbursement this Period				
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	Mailing Address 8501 North Ev	anston Ave	enue			1 1 28	2005	
	City Kansas City		State MO	Zip Code 64157-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement OFFICE SUPPLIES				· · ·	Refund or Dispos	264.94	
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	quired Under	
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: OFFICE S	UPPLIES	
	State: District:							
В.	Full Name (Last, First, Middle Initial) Super 8 Motel					Transaction ID: 604 Date of Disbursemen	t	
	Mailing Address I-29 & 136 HV	/Y				12 04	2005	
	City Rock Port		State MO	Zip Code 64482-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement MOTEL ROOM					52.79 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	quired Under	
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General		[MEMO ITEM] MEMO: MOTEL RO	OOM	
	State: District:		O (Op 0	JGJ) ↓				
C.	Full Name (Last, First, Middle Initial) Super 8 Motel	•				Transaction ID: 604 Date of Disbursemen	-	
	Mailing Address I-29 & 136 HV	/Υ				12 04	2005	
	City Rock Port		State MO	Zip Code 64482-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement MOTEL ROOM					5/2 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Rec		
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ▼		[MEMO ITEM] MEMO: MOTEL RO	OOM	
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\setminus	NAME OF COMMITTEE (In Full)						
/	Graves for Congress						
<u>/</u>	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2154		
A.	Super 8 Motel				Date of Disbursement	V	
	Mailing Address I-29 & 136 HWY				1 2 M / D 0 4 Y 2 0 0 5		
			p Code 4482-		Amount of Each Disbursement this P	eriod	
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	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse	ment For:		.) -	[MEMO ITEM] MEMO: MOTEL ROOM		
	Senate	Primary	General		MEMO. MOTEL ROOM		
	President State: District:	Other (specify)	▼				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60401 F0150		
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	Senate President	Primary Other (specify)	General				
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C.	Full Name (Last, First, Middle Initial) Super 8 Motel				Transaction ID: 60421.E2148 Date of Disbursement		
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	Senate	Primary	General		MEMO: MOTEL ROOM		
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Rock Port Purpose of Disbursement MOTEL ROCM Candidate Name Office Sought:		CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 75 / 105
NAME OF COMMITTEE (In Full) Graves for Congress Full Name (Last, First, Middle Initial) Super 8 Motel Mailing Address 1-29 & 136 HWY City			Detailed Summary Page		X 17
Full Name (Last, First, Middle Initial) Super 8 Motel Mailing Address I-29 & 136 HWY City State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2153 Date of Disbursement In 12 " " 0 0 4" Y X 2 0 0 5 Y Amount of Each Disbursement the Peri Scaregory' Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN IN IN INTERPRETATION					
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City State Zip Code MO 64482- Purpose of Disbursement MOTEL ROOM Candidate Name Disbursement For: Senate Primary General Primary General District: Transaction ID: 60421.E2126 Date of Disbursement this Pericular State: District: City State Zip Code MO 64068- Purpose of Disbursement For: Mailing Address 844 S M-291 Hwy City State Zip Code MO 64068- Category/ Type Amount of Each Disbursement this Pericular State: District: Amount of Each Disbursement this Pericular State Sta	В.	Super 8 Motel			
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	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		FOR LINE (check only	E NUMBER: PAGE 76 / 105		
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		l `	X 17	9a 19b 20c 21	
	y Information copied from such Reports and Statem				or the purpose of solication	ng contributions	
or	for commercial purposes, other than using the name	and address of any po	olitical cor	mmittee to sol	icit contributions from su	ch committee	
	NAME OF COMMITTEE (In Full) Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 6042 Date of Disbursement		
	Mailing Address 1904 Clay Street				11 28	[°] 2005 [°]	
		State Zip Code MO 64601-			Amount of Each Disbu		
	Purpose of Disbursement AIRFARE		Г	•	Refund or Disposa	155.20	
	Candidate Name			Category/ Type	Contributions Req 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ment For: Primary Ger Other (specify)	neral		[MEMO ITEM] MEMO: AIRFARE		
	State: District:						
	Full Name (Last, First, Middle Initial)				Transaction ID: 6042	21.E2129	
В.	Travel Tyme				Date of Disbursement		
	Mailing Address 1904 Clay Street				111 / 28	2005	
	•	State Zip Code MO 64601-			Amount of Each Disbu		
	Purpose of Disbursement AIRFARE		Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ment For: Primary Ger Other (specify)	neral		[MEMO ITEM] MEMO: AIRFARE		
	State: District:						
C.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 6042 Date of Disbursement		
	Mailing Address 1904 Clay Street				11 / 28	Ž O O S	
		State Zip Code MO 64601-			Amount of Each Disbu		
	Purpose of Disbursement AIRFARE				Refund or Disposa	155.20	
	Candidate Name	Category/ Type	Contributions Req 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President		neral		MEMO: AIRFARE		
_	State: District:	<u> </u>					
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SCHEDULE B (FEC Form 3)		Use seperate schedule(s)		E NUMBER: PAGE 77 / 105			
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	Information copied from such Reports and Statem or commercial purposes, other than using the name						
\setminus	NAME OF COMMITTEE (In Full)						
	Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60 Date of Disburseme	-		
	Mailing Address 1904 Clay Street			111 28	['] 2005 [']		
	City Chillicothe		Amount of Each Disbursement this Period				
	Purpose of Disbursement AIRFARE			Refund or Dispo			
	Candidate Name		Category/ Type	Contributions Re 11 C.F.R. 400.5 [MEMO ITEM]			
	Senate President	ement For: Primary General Other (specify)		MEMO: AIRFARE	Ē		
_	State: District: Full Name (Last, First, Middle Initial)						
В.	Travel Tyme			Transaction ID: 60 Date of Disburseme	ent		
	Mailing Address 1904 Clay Street		11 0 7 2005				
	City Chillicothe		Amount of Each Dis	sbursement this Period			
	Purpose of Disbursement AIRFARE			92.20 Refund or Disposal of Excess Contributions Paging Under			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]			
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		MEMO: AIRFARE			
<u> </u>	Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60			
	Mailing Address 1904 Clay Street		111 / 28	2005			
		State Zip Code MO 64601-		Amount of Each Dis	sbursement this Period		
	Purpose of Disbursement AIRFARE	115 Refund or Disposal of Excess		115.20 osal of Excess			
	Candidate Name	Category/ Type	Contributions Re 11 C.F.R. 400.5 [MEMO ITEM]				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		MEMO: AIRFARE	≣		
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SCHEDULE B (FEC Form 3) Use seperate schedule(s)					NUMBER: PAGE 78 / 105		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) Travel Tyme Mailing Address 1904 Clay Street				Transaction ID: 60421.E2103 Date of Disbursement 1 1 0 7 2 0 0 5		
	City	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE			• •	318.40 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Senate President	ment For: Primary Other (spec	General		MEMO: AIRFARE		
	State: District:						
В.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2134 Date of Disbursement		
	Mailing Address 1904 Clay Street				1 1 M / D 2 8 / Y 2 0 0 5 Y		
	,	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE				115.20 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Senate President	ment For: Primary Other (spec	General ▼		MEMO: AIRFÂRE		
	State: District:						
C.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2137 Date of Disbursement		
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & 2 & B \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Q & Y \\ 2 & 0 & 0 & 5 \end{bmatrix} $		
		State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE			• •	115.20 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		[MEMO ITEM] MEMO: AIRFARE		
	State: District:						
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SCHEDULE B (FEC Form 3)				FOR LINI	E NUMBER: PAGE 79 / 105				
ITEMIZED DISBURSEMENTS		-	Use seperate schedule(s) for each category of the Detailed Summary Page		(check on	ly one)			
						X 17 18 19a 19b 20a 20b 20c 21			
						for the purpose of solicating contributions olicit contributions from such committee			
Λ	NAME OF COMMITTEE (In Full))							
Z	Graves for Congress								
Α.	Full Name (Last, First, Middle Init Travel Tyme	tial)				Transaction ID: 60421.E2115 Date of Disbursement			
		Ctroot				1 1 1 8 2 0 0 5			
		Sireei							
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period			
	Purpose of Disbursement AGENT FEE					20.00 Refund or Disposal of Excess			
	Candidate Name				Category/	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House	Disburse	ement For:		Туре	[MEMO ITEM]			
	Senate		Primary	General		MEMO: AGENT FEE			
	State: President District:		Other (spe	eciry) 🔻					
В.	Full Name (Last, First, Middle Init	tial)				Transaction ID: 60421.E2104			
٠.						Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 1904 Clay	11 10 2005							
	City Chillicothe		State MO	Zip Code 64601-		Amount of Each Disbursement this Period			
	Purpose of Disbursement AGENT FEE					20.00 Refund or Disposal of Excess			
	Candidate Name				Category/	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House	Disburse	ement For:		Туре	[MEMO ITEM]			
	Senate		Primary	General		MEMO: AGENT FEE			
	State: President District:		Other (spe	ecity) 🔻					
_	Full Name (Last, First, Middle Init	tial)				Transaction ID: 60421.E2135			
C.	Travel Tyme					Date of Disbursement			
	Mailing Address 1904 Clay	Street				M M / D B / Y 2005			
	City Chillicothe		State	Zip Code		Amount of Each Disbursement this Period			
	Chillicothe MO 64601- Purpose of Disbursement					115.20			
	AIRFARE				Category/	Refund or Disposal of Excess Contributions Required Under			
	Candidate Name					11 C.F.R. 400.53 [MEMO ITEM]			
	Office Sought: House Senate	Disburse	ement For: Primary	General		MEMO: AIRFARE			
	President		Other (spe						
_	State: District:			· 					
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SCHEDULE B (FEC Form 3)		Use seperate schedule(s)	-	E NUMBER: PAGE 80 / 105				
ITEMIZED DISBURSEMENTS		for each category of the	(Crieck only					
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_	16 1 10 10 10 10 10 10 10 10 10 10 10 10 1			20a 20b 20c 21				
	ny Information copied from such Reports and State for commercial purposes, other than using the nar							
$\overline{\ }$	NAME OF COMMITTEE (In Full)							
\rangle	Graves for Congress							
۹.	Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60421.E2133 Date of Disbursement				
	Mailing Address 1904 Clay Street			$\begin{bmatrix} \begin{smallmatrix} M & I & M \\ 1 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{bmatrix} $				
	City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period				
	Purpose of Disbursement AIRFARE			115.20 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼	,	[MEMO: AIRFARE				
	Full Name (Last, First, Middle Initial)			T :: ID 00404 F0440				
3.	Travel Tyme			Transaction ID: 60421.E2112 Date of Disbursement				
	Mailing Address 1904 Clay Street	1 1 M / D 1 8 / Y 2 0 0 5 Y						
	City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period				
	Purpose of Disbursement AIRFARE		Category/ Type	133.20 Refund or Disposal of Excess				
	Candidate Name			Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]				
	Senate President	sement For: Primary General Other (specify) ▼		MEMO: AIRFARE				
	State: District:							
Э.	Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60421.E2120 Date of Disbursement				
	Mailing Address 1904 Clay Street	111 21 7 2005						
	City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period				
	Purpose of Disbursement AIRFARE	92.20 Refund or Disposal of Excess						
	Candidate Name							
	Senate President	sement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: AIRFARE				
	State: District:							
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SCHEDULE B (FEC Form 3)			Use seperate schedule(s)		NUMBER: PAGE 81 / 105
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page	(check only	X 17	
		Detailed of	animary r age		20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
Λ	NAME OF COMMITTEE (In Full)				
/	Graves for Congress				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2116
Α.	Travel Tyme				Date of Disbursement
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 1 & B \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 & Y \end{bmatrix}$
			Zip Code 64601-		Amount of Each Disbursement this Period
	Purpose of Disbursement AGENT FEE			•	20.00 Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
	Office Sought: House Disburse	ment For:		Туре	[MEMO ITEM]
	Senate	Primary	General		MEMO: AGENT FEE
	President	Other (speci	fy) 🔻		
	State: District:				
В.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2118 Date of Disbursement
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
	,		Zip Code 64601-		Amount of Each Disbursement this Period
	Purpose of Disbursement AIRFARE		399.20		
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ment For:		71	[MEMO ITEM] MEMO: AIRFARE
	Senate	Primary	General		MEMO. AITH ATE
	President State: District:	Other (speci	ту) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2114
C.	Travel Tyme				Date of Disbursement
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$
			Zip Code 64601-		Amount of Each Disbursement this Period
	Purpose of Disbursement				-614.90
	CREDIT ON AIRFARE Candidate Name			Catagory	Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ment For:			[MEMO ITEM] MEMO: CREDIT ON AIRFARE
	Senate	Primary	General		MEMO. OILDIT ON AIRI ARE
	President State: District:	Other (speci	ту) 🔻		
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SCHEDULE B (FEC Form 3)			E NUMBER: PAGE 82 / 105						
ITEMIZED DISBURSEMENTS for	each category of the ailed Summary Page	(check only	X 17	18	19a 20c	19b 21			
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NAME OF COMMITTEE (In Full) Graves for Congress									
Full Name (Last, First, Middle Initial) A. Travel Tyme			Transaction Date of Disk	burseme	nt				
Mailing Address 1904 Clay Street	Mailing Address 1904 Clay Street					111 / 16 / 2005			
City State Chillicothe MO		Amount of Each Disbursement this Period							
Purpose of Disbursement AGENT FEE				or Dispos					
Candidate Name	Candidate Name Category/								
			[MEMO ITI MEMO: AC	-	EE				
State: District: Full Name (Last, First, Middle Initial)			Transaction	n ID: 60/	121 F21	138			
B. Travel Tyme	Travel Tyme				nt				
Mailing Address 1904 Clay Street	Mailing Address 1904 Clay Street					2005			
City State Chillicothe MO					burseme	nt this Period			
Purpose of Disbursement AGENT FEE		* *	Refund or Disposal of Excess			50.00			
Candidate Name		Category/ Type	Contribu	utions Re R. 400.53	quired U				
			[MEMO ITEM] MEMO: AGENT FEE						
State: District: Full Name (Last, First, Middle Initial)			Transaction	ID- CO	101 501	147			
C. Travel Tyme			Date of Disk	burseme	nt				
Mailing Address 1904 Clay Street			111						
City State Chillicothe MO	Zip Code 64601-		Amount of E	Each Dis	burseme	nt this Period			
Purpose of Disbursement AIRFARE		• •	Refund	or Dispos	sal of Exc	614.90 cess			
Candidate Name	Candidate Name Category/				quired U				
Office Sought: House Disbursement Senate Prim President Othe State: District:			[MEMO ITI MEMO: All						
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the Detailed Summary Page	FOR LINE (check on	PAGE 83 / 105 PAGE 83 / 105 PAGE 83 / 206 PAGE 83 / 105 PAGE 83 / 10
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Travel Tyme Mailing Address 1904 Clay Street			Transaction ID: 60421.E2132 Date of Disbursement 111
	City Chillicothe Purpose of Disbursement AIRFARE Candidate Name Office Sought: House Senate	State Zip Code 64601- ement For: Primary General	Category/ Type	Amount of Each Disbursement this Period 155.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: AIRFARE
	State: President State: District: Full Name (Last, First, Middle Initial)	Other (specify) ▼		Transaction ID: 60421,E2122
B.	Travel Tyme Mailing Address 1904 Clay Street			Date of Disbursement M M D D D D D D D D
	City Chillicothe Purpose of Disbursement AGENT FEE Candidate Name Office Sought: House Disburse	State Zip Code MO 64601-	Category/ Type	Amount of Each Disbursement this Period 20.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Senate President State: District:	Primary General Other (specify)		MEMO: AGENT FEE
C.	Full Name (Last, First, Middle Initial) Travel Tyme			Transaction ID: 60421.E2108 Date of Disbursement
	Mailing Address 1904 Clay Street			1 1 1 0 1 6 Y 2 0 0 5 Y
	City Chillicothe Purpose of Disbursement AIRFARE Candidate Name Office Sought: House Senate	State Zip Code MO 64601- ement For: Primary General	Category/ Type	Amount of Each Disbursement this Period 159.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: AIRFARE
	President State: District:	Other (specify)		
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	y Information copied from such Reports and S for commercial purposes, other than using the						
\setminus	NAME OF COMMITTEE (In Full)						
V	Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) Travel Tyme Mailing Address 1904 Clay Street				Transaction ID: 60421.E2100 Date of Disbursement 111 08 2005		
	Mailing Address 1904 Clay Street						
	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AGENT FEE				25.00 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Senate President	oursement For: Primary Other (spe	General ecify) ▼	.,,,,,	[MEMO ITEM] MEMO: AGENT FEE		
_	State: District:						
В.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2096 Date of Disbursement		
	Mailing Address 1904 Clay Street	$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 \end{smallmatrix} \begin{smallmatrix} M \\ 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M & M \\ 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M & M \\ 2 \end{smallmatrix} \begin{bmatrix} M & M \\ 2 \end{smallmatrix} \begin{bmatrix} M & M \\ 3 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M & M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \\ M \end{bmatrix} \begin{bmatrix} M \\ M \end{bmatrix} \begin{bmatrix} M & M \\ M \end{bmatrix} \begin{bmatrix} M \\ M$					
	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement CREDIT ON AIRFARE		-770.40 Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Dist	oursement For: Primary Other (spe	General		MEMO: CREDIT ON AIRFARE		
	State: District:	• (• • •	√y) \				
C.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2095 Date of Disbursement		
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} $		
	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AIRFARE	363.00					
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disk Senate President	Primary Other (spe	General		[MEMO ITEM] MEMO: AIRFARE		
_	State: District:		·-··J/ ▼				
s	UBTOTAL of Disbursements This Page (option	nal)		>	0.00		

SCHEDULE B (FEC Form 3)		Use sepe	erate schedule(s)	FOR LINE	E NUMBER: PAGE 85 / 105		
_	EMIZED DISBURSEMENTS	Detailed	category of the Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports and for commercial purposes, other than using the sum of the commercial purposes.						
\setminus	NAME OF COMMITTEE (In Full)						
V	Graves for Congress						
Α.	Full Name (Last, First, Middle Initial) Travel Tyme Mailing Address 1904 Clay Street				Transaction ID: 60421.E2099 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
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	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement CREDIT ON AIRFAIR				-385.20 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Senate President	Primary Other (spe	General ecify) ▼	. , , , ,	[MEMO ITEM] MEMO: CREDIT ON AIRFAIR		
	State: District: Full Name (Last, First, Middle Initial)						
В.	Travel Tyme				Transaction ID: 60421.E2101 Date of Disbursement		
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & B \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix} $		
	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement CREDIT ON AIRFARE		-159.20 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House D Senate President	Primary Other (spe	General		[MEMO ITEM] MEMO: CREDIT ON AIRFARE		
	State: District:	(·- 3, •				
C.	Full Name (Last, First, Middle Initial) Travel Tyme				Transaction ID: 60421.E2139 Date of Disbursement		
	Mailing Address 1904 Clay Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{smallmatrix} \end{bmatrix}$		
	City Chillicothe	State MO	Zip Code 64601-		Amount of Each Disbursement this Period		
	Purpose of Disbursement AGENT FEE		Г	• •	50.00		
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	isbursement For: Primary Other (spe	General	··	[MEMO ITEM] MEMO: AGENT FEE		
_	State: District:		,y) ▼				
s	UBTOTAL of Disbursements This Page (op	otional)		<u> </u>	0.00		

Ŭ	e# 26960080812			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LIN (check or	E NUMBER: PAGE 86 / 105 X
	y Information copied from such Reports and State for commercial purposes, other than using the na			n for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress	,,		
Α.	Full Name (Last, First, Middle Initial) Travel Tyme Mailing Address 1904 Clay Street			Transaction ID: 60421.E2106 Date of Disbursement 1 1 1 1 2 0 0 5
	City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period -318.40
	Purpose of Disbursement CREDIT ON AIRFARE Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		MEMO: CREDIT ON AIRFARE
В.	Full Name (Last, First, Middle Initial) U.S. House of Representatives Mailing Address U.S. Capitol			Transaction ID: 60421.E2125 Date of Disbursement M M M / D 2 B / Y 2 0 0 5
	City Washington	State Zip Code DC 20515-		Amount of Each Disbursement this Period
	Purpose of Disbursement GIFT FOR CONSTITUENT Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate President State: Disbur	sement For: Primary General Other (specify) ▼		MEMO: GIFT FOR CONSTITUENT
C.	Full Name (Last, First, Middle Initial) USPS-Liberty			Transaction ID: 60421.E2105 Date of Disbursement
	Mailing Address 1000 Progress Dr			M M / D 1 Å / Y Ž 0 Ď 5 Y
	City Liberty		Amount of Each Disbursement this Period 37.00	
	Purpose of Disbursement POSTAGE Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	sement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: POSTAGE
	State: District:			
s	UBTOTAL of Disbursements This Page (optional)		0.00

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SCHEDULE B (FEC Form 3 ITEMIZED DISBURSEMEN		-	Use seperate schedule(s)			E NUMBER: PAGE 87 / 105					
		MENTS				X 17 18 19a 19b 20a 20b 20c 21					
						for the purpose of solicating contributions clicit contributions from such committee					
\setminus	NAME OF COMMITTEE (In Ful)									
$ \rangle$	Graves for Congress										
Α.	Full Name (Last, First, Middle Ini USPS-NKC	tial)				Transaction ID: 60421.E2119 Date of Disbursement M M					
	Mailing Address 820 Armo	ur Rd				111					
	City Kansas City		State MO	Zip Code 64116-		Amount of Each Disbursement this Period					
	Purpose of Disbursement STAMPS					74.00 Refund or Disposal of Excess					
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President		ement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: STAMPS					
	State: District:			•							
В.	Full Name (Last, First, Middle In Village Flowers by Rob	tial)				Transaction ID: 60421.E2098 Date of Disbursement					
	Mailing Address 3841 Fred	lerick Ave				$ \begin{bmatrix} M & M & M & M & M & M & M & M & M & M &$					
	City Saint Joseph		State MO	Zip Code 64506-		Amount of Each Disbursement this Period					
	Purpose of Disbursement SYMPATHY FLOWERS					68.80 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Senate President		ement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: SYMPATHY FLOWERS					
	State: District:										
C.	Full Name (Last, First, Middle Ini Watkins True Value	tial)				Transaction ID: 60421.E2147 Date of Disbursement					
	Mailing Address 1416 S. M	lain				$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$					
	City Maryville		State MO	Zip Code 64468-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CHRISTMAS PARTY SUPPLIES					166.80 Refund or Disposal of Excess					
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President		ement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: CHRISTMAS PARTY SUP- PLIES					
	State: District:		` '	·							
s	UBTOTAL of Disbursements Thi	s Page (optional)				0.00					

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 88 / 105 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2143 Y Liquor Date of Disbursement 0 2 2005 Mailing Address 346 S. State Route 291 Zip Code City State Amount of Each Disbursement this Period MO 64068-Liberty 616.51 Purpose of Disbursement FOOD/BEVERAGE FOR EVENT Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] MEMO: FOOD/BEVERAGE FOR EVENT Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2167 Tom Brand Date of Disbursement 0 1 2005 Mailing Address 3204 Dale Avenue City State Zip Code Amount of Each Disbursement this Period Saint Joseph MO 64506-240.50 Purpose of Disbursement **EVENTS - SPEAKING FEE** Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: **EVENTS - SPEAKING FEE** Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60421.C6777IK C. National Republican Congressional Commit Date of Disbursement 0 2 2005 Mailing Address 320 First Street, S.E. City State Zip Code Amount of Each Disbursement this Period Washington DC 20003-98.00 Purpose of Disbursement FAX SENT ON BEHALF OF CANDIADT Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: IN KIND: FAX SENT ON BEHA-LF OF CANDIADT Senate Primary General President Other (specify) State: District:

338.50

SUBTOTAL of Disbursements This Page (optional) ..

SCHEDULE B (FEC Form 3)			FOR LII	NUMBER: PAGE 89 / 105		
ITEMIZED DISBURSEMENTS		Use seperate schedule(s)	(check o	only one)		
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	y Information copied from such Reports and for commercial purposes, other than using t					
\setminus	NAME OF COMMITTEE (In Full)					
/	Graves for Congress					
Α.	Full Name (Last, First, Middle Initial) Kurtz Rural Aviation			Transaction ID: 60421.E2160 Date of Disbursement		
	Mailing Address 130 Airport Lane			1 1 M M / D D D / Y 2 0 0 5 Y		
	City Mound City	State Zip Code MO 64470-		Amount of Each Disbursement this Period		
	Purpose of Disbursement TRAVEL - AVIATION FUEL			518.96 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Senate President	isbursement For: Primary General Other (specify)		TRAVEL - AVIATION FUEL		
	State: District:					
В.	Full Name (Last, First, Middle Initial) National Republican Congressional	Transaction ID: 60421.C6576IK Date of Disbursement				
	Mailing Address 320 First Street, S	E.		111 08 7 2005		
	City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period		
	Purpose of Disbursement	98.00				
	FAX SENT ON BEHALF OF CANDIDAT Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	risbursement For: Primary General Other (specify) ▼	Туре	IN KIND: FAX SENT ON BEHA- LF OF CANDIDAT		
	State: District:					
C.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60421.E2201 Date of Disbursement		
	Mailing Address 400 W. Covina Blv	rd.		10 1 2 0 5 5		
	City San Dimas	State Zip Code CA 91773-		Amount of Each Disbursement this Period		
	Purpose of Disbursement PARYROLL EXPENSE	Purpose of Disbursement				
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	isbursement For: Primary General Other (specify)		PARYROLL EXPENSE		
	State: District:					
s	UBTOTAL of Disbursements This Page (or	otional)		1654.52		

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE	NUMBER: PAGE 90 / 105					
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page	(check only	y one)	19a				
		Detailed Summary Page		20a 20b	20c 21				
	y Information copied from such Reports and Sta for commercial purposes, other than using the n								
\setminus	NAME OF COMMITTEE (In Full)								
Z	Graves for Congress								
A.	Full Name (Last, First, Middle Initial) Shawn Graybill			Transaction ID: 604 Date of Disbursemen					
	Mailing Address 4443 NE 83rd Terr			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City Kansas City	State Zip Code MO 64119-		Amount of Each Disk	oursement this Period				
	Purpose of Disbursement SALARY			Refund or Dispos					
	Candidate Name		Category/ Type	Contributions Red					
	Senate President	rsement For: Primary General Other (specify)		SALARY					
	State: District:								
В.	Full Name (Last, First, Middle Initial) Shawn Graybill			Transaction ID: 604 Date of Disbursemer	nt				
	Mailing Address 4443 NE 83rd Terr		10 M / D 3 1 / Y Y Y O O 5 Y						
	City Kansas City	State Zip Code MO 64119-		Amount of Each Dist	oursement this Period				
	Purpose of Disbursement SALARY			2500.00 Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Re					
	Office Sought: House Disbu	rsement For: Primary General Other (specify) ▼		SALARY					
	State: District:								
C.	Full Name (Last, First, Middle Initial) Friendly Phones, Inc.			Transaction ID: 60421.E2170 Date of Disbursement					
	Mailing Address P.O. Box 147		12 19 / 2005						
	City Bethany	State Zip Code MO 64424-		Amount of Each Dist	oursement this Period				
	Purpose of Disbursement COMPUTER SYSTEM LEASE		Refund or Dispos						
	Candidate Name	Category/ Type	Contributions Red						
	Senate President	rsement For: Primary General Other (specify)		COMPUTER SYS	TEM LEASE				
_	State: District:								
s	UBTOTAL of Disbursements This Page (option	al))		6530.00				
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91	CHEDIII E B /EEC Form 2	\				
	CHEDULE B (FEC Form 3		Use sepe	erate schedule(s)		NE NUMBER: PAGE 91 / 105 only one)
П	EMIZED DISBURSEMENT	S		category of the Summary Page	(000	X 17 18 19a 19b
						20a 20b 20c 21
	y Information copied from such Reports ar for commercial purposes, other than using					on for the purpose of solicating contributions solicit contributions from such committee
Ν	NAME OF COMMITTEE (In Full)					
/	Graves for Congress					
<u></u>	Full Name (Last, First, Middle Initial)					T ID 00404 F0404
A.	Sarah N. Bowles					Transaction ID: 60421.E2191 Date of Disbursement
	Mailing Address 10231 N. Cherry	Dr.				1 1 1
	City Kansas City		State MO	Zip Code 64155-		Amount of Each Disbursement this Period
	Purpose of Disbursement		VIO	04133-		2500.00
	SALARY					Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser				SALARY
	Senate President		Primary Other (spe	General		
	State: District:		Other (Spe	Oli y) ▼		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60421.E2189
В.	Shawna M. Pauley				Date of Disbursement	
	Mailing Address 1126 Elm Street					1 2 M / D D D / Y 2 0 0 5 Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Chillicothe		MO	64601-		2000.00
	Purpose of Disbursement SALARY					Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser				SALARY
	Senate President		Primary Other (spe	General		
	State: District:		Other (spe	City) \blacktriangledown		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60421.E2176
C.	Nova Information Systems					Date of Disbursement
	Mailing Address 7300 Chapman H	Highway				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Knoxville		State TN	Zip Code 37920-		Amount of Each Disbursement this Period
	Purpose of Disbursement					30.11
	CREDIT CARD PROCESSING FEE					Refund or Disposal of Excess Contributions Required Under
	Candidate Name				Category/ Type	11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:			CREDIT CARD PROCESSING FEE
	Senate		Primary	General		GREDIT GARD FROGESSING FEE
	State: President District:		Other (spe	cify)		
Г	State: District:					
s	UBTOTAL of Disbursements This Page (optional)			b	4530.11

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	CHEDULE B (FEC Form 3)	Use seperate sc	hedule(s)	FOR LINE (check only	E NUMBER: PAGE 92 / 105		
IT	EMIZED DISBURSEMENTS	for each category Detailed Summa		(Crieck only	X 17		
An	y Information copied from such Reports and Staten	ents may not be so	old or used by	any person fo	20a 20b 20c 21		
	for commercial purposes, other than using the name						
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress						
<u></u>	Full Name (Last, First, Middle Initial)				IF 00.404 F0.400		
A.	Federal Express				Transaction ID: 60421.E2169 Date of Disbursement		
	Mailing Address 1210 Mexico City Ave				12 M / D 1 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Kansas City	State Zip C MO 6415			Amount of Each Disbursement this Period		
	Purpose of Disbursement SHIPPING CHARGES		Г	•	23.06		
	Candidate Name		C	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General	71-	SHIPPING CHARGES		
	State: District:	Carlor (openity)					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60421.E2182		
В.	Automatic Data Processing, Inc.				Date of Disbursement		
	Mailing Address 400 W. Covina Blvd.				$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{bmatrix} $		
		State Zip C			Amount of Each Disbursement this Period		
	San Dimas Purpose of Disbursement		72.46				
	PROCESSING FEE Candidate Name			Category/	Refund or Disposal of Excess Contributions Required Under		
				Туре	11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General		PROCESSING FEE		
	State: District:						
C.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.				Transaction ID: 60421.E2181 Date of Disbursement		
	Mailing Address 400 W. Covina Blvd.				111 09 7 2005		
	City San Dimas	State Zip C CA 9177			Amount of Each Disbursement this Period		
	Purpose of Disbursement PROCESSING FEE			•	31.00		
	Candidate Name		C	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Senate		General	,	PROCESSING FEE		
	President State: District:	Other (specify)	7				
s	UBTOTAL of Disbursements This Page (optional)				126.52		

SCHEDULE B (FEC Form 3)		Use seperate schedule(s)	FOR LINE			
	MIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	Information copied from such Reports and Statem r commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full)					
<u> </u>	Graves for Congress					
	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.			Transaction ID: 60421.E2184 Date of Disbursement		
i	Mailing Address 400 W. Covina Blvd.			10 M / D31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
		State Zip Code CA 91773-		Amount of Each Disbursement this Period		
	Purpose of Disbursement PAYROLL EXPENSE			562.56		
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		PAYROLL EXPENSE		
	Full Name (Last, First, Middle Initial)			Transaction ID: 60421,E2159		
3.	David P. Williams			Date of Disbursement		
-	Mailing Address 1554 Canterbury Lane			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 19 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2005 \end{smallmatrix} \end{bmatrix} $		
	,	State Zip Code MO 64068-		Amount of Each Disbursement this Period		
	Purpose of Disbursement CAMPAIGN OFFICE RENT/UTILITIES		1291.89			
-	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President District:	ment For: Primary General Other (specify) ▼		CAMPAIGN OFFICE RENT/UTIL- ITIES		
_	Full Name (Last, First, Middle Initial) Express Flight, Inc.			Transaction ID: 60421.E2166 Date of Disbursement		
i	Mailing Address P.O. Box 3262, Station A			12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
		State Zip Code MO 64503-		Amount of Each Disbursement this Period		
	Purpose of Disbursement TRAVEL - AIRFARE			2783.74 Refund or Disposal of Excess Contributions Required Under		
,	Candidate Name		Category/ Type	11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		TRAVEL - AIRFARE		
	Side State S			4638.19		

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SCHEDULE B (FEC Form 3) Use seperate schedule(s)			2)	LINE NUMBER: PAGE 94 / 105 ck only one)
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	`	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) The Mail Haus			Transaction ID: 60421.E2163 Date of Disbursement 1 1
	Mailing Address 1709 Surburban Dr.			
	•	State Zip Code WI 54115-	_	Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING			1554.00 Refund or Disposal of Excess
	Candidate Name		Categor Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Genera Other (specify) ▼		MAILING
	State: District:			
В.	Full Name (Last, First, Middle Initial) The Lukens Company			Transaction ID: 60421.E2173 Date of Disbursement
	Mailing Address 2800 Shirlington Road			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State Zip Code VA 22202-		Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING			6676.63 Refund or Disposal of Excess
	Candidate Name		Categor Type	
	Office Sought: House Disburse Senate President	ment For: Primary Genera Other (specify) ▼		MAILING
	State: District:	Carior (openity)		
C.	Full Name (Last, First, Middle Initial) CM Events			Transaction ID: 60421.E2168 Date of Disbursement
	Mailing Address 1077 Fairfax Circle West			12 19 / 2005
		State Zip Code FL 33436-		Amount of Each Disbursement this Period
	Purpose of Disbursement			286.87
	FUNDRAISING EXPENSE Candidate Name		Categor Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Genera Other (specify) ▼	1	FUNDRAISING EXPENSE
_	State: District:	- (-I::)/ \		
s	UBTOTAL of Disbursements This Page (optional) .			8517.50

SCHEDULE B (FEC Form 3	Use seperate schedule(s)	FOR LINE	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2						
ITEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	(check only	(none)						
Any Information copied from such Reports ar or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full) Graves for Congress									
Full Name (Last, First, Middle Initial) A. Sarah N. Bowles			Transaction ID: 60421.E2190 Date of Disbursement						
Mailing Address 10231 N. Cherry	Dr.		$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 3 & 1 \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 2 & 0 & 0 & 5 \end{bmatrix}$						
City Kansas City	State Zip Code MO 64155-		Amount of Each Disbursement this Period						
Purpose of Disbursement SALARY Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		SALARY						
Full Name (Last, First, Middle Initial) National Republican Congressiona	l Commit		Transaction ID: 60421.C6775IK Date of Disbursement 12						
Mailing Address 320 First Street,	Mailing Address 320 First Street, S.E.								
City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period						
Purpose of Disbursement FAX SENT ON BEHALF OF CANDIDAT Candidate Name		Category/	98.00 Refund or Disposal of Excess Contributions Required Under						
		Type	11 C.F.R. 400.53						
Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		IN KIND: FAX SENT ON BEHA- LF OF CANDIDAT						
Full Name (Last, First, Middle Initial) Shawna M. Pauley			Transaction ID: 60421.E2198 Date of Disbursement						
Mailing Address 1126 Elm Street			$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{bmatrix}$						
City Chillicothe	State Zip Code MO 64601-		Amount of Each Disbursement this Period						
Purpose of Disbursement SALARY	Purpose of Disbursement								
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		SALARY						
SUBTOTAL of Disbursements This Page (SUBTOTAL of Disbursements This Page (optional)								
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3)		Use seperate schedule(s)	FOR LINE		NUMBER: PAGE 96 / 10				96 / 105	
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	y Information copied from such Reports and States for commercial purposes, other than using the r									
\setminus	NAME OF COMMITTEE (In Full)									
	Graves for Congress									
Α.	Full Name (Last, First, Middle Initial) A. Shawn Graybill					ction ID: Disburse	emen		194	
	Mailing Address 4443 NE 83rd Terr				1 1	[′] 3	0	/ Y	2 0 0 5 °	
	City Kansas City	State Zip Code MO 64119-			Amount	t of Each	Disb		nt this Period	
	Purpose of Disbursement SALARY					und or Di		al of Ex		
	Candidate Name		Cateo Typ			tributions C.F.R. 40		quired U	nder	
	Office Sought: House Senate President State: District:	ursement For: Primary General Other (specify) ▼			SALAR	Υ				
В.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.					ction ID:			 179	
	Mailing Address 400 W. Covina Blvd.					10 0 5 / 2005				
	City San Dimas	State Zip Code CA 91773-			Amount	t of Each	Disb	urseme	nt this Period	
	Purpose of Disbursement PROCESSING FEES Candidate Name	Categ	gory/	Con	und or Di	s Rec	quired U			
	Office Sought: House Disb	ursement For:	Тур			C.F.R. 40				
	Senate President State: District:	Primary General Other (specify) ▼			PROCE	ESSING	i FE	ES		
С.	Full Name (Last, First, Middle Initial) Nova Information Systems					ction ID: Disburse			202	
	Mailing Address 7300 Chapman Highway					10 M / D D / Y Y Y Y Y Y				
	City Knoxville	State Zip Code TN 37920-			Amount	t of Each	Disb	urseme	nt this Period	
	Purpose of Disbursement CREDIT CARD PROCESSING FEE					und or Di				
	Candidate Name		Cateo Typ			tributions C.F.R. 40			nder	
	Office Sought: House Disb Senate President State: District:	ursement For: Primary General Other (specify) ▼			CREDI	T CARE) PR	OCES	SING FEE	
SI	UBTOTAL of Disbursements This Page (option	nal)		•					2612.36	
	OTAL This Period (last page this line number of			<u> </u>			=	•		

S	CHEDULE B (FEC Form 3)		. 1	FOR LINE	NUMBER: PAGE 97 / 105			
ITEMIZED DISBURSEMENTS		Use seperate schedule(s	s)	(check onl	ly one)			
		Detailed Summary Page			X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and Stat for commercial purposes, other than using the na							
Λ	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	Graves for Congress							
Α.	Full Name (Last, First, Middle Initial) Scott E. Thomas Photography				Transaction ID: 60421.E2172 Date of Disbursement			
	Mailing Address 6133 Blue Ridge Blvd.				12 M / D 1 D / Y Y Y O O 5 Y			
	City Kansas City	State Zip Code MO 64113-			Amount of Each Disbursement this Period			
	Purpose of Disbursement CAMPAIGN PHOTOS				38.05 Refund or Disposal of Excess			
	Candidate Name		С	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	rsement For: Primary General Other (specify)			CAMPAIGN PHOTOS			
	State: District:							
В.	Full Name (Last, First, Middle Initial) Shawna M. Pauley				Transaction ID: 60421.E2187 Date of Disbursement			
	Mailing Address 1126 Elm Street				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City Chillicothe	State Zip Code MO 64601-			Amount of Each Disbursement this Period			
	Purpose of Disbursement SALARY			2000.00 Refund or Disposal of Excess				
	Candidate Name		C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify) ▼			SALARY			
	State: District:	Carior (opeony)						
C.	Full Name (Last, First, Middle Initial) Sarah N. Bowles				Transaction ID: 60421.E2192 Date of Disbursement			
	Mailing Address 10231 N. Cherry Dr.	1 2 9 Y 2 0 0 5 Y						
	City Kansas City	State Zip Code MO 64155-			Amount of Each Disbursement this Period			
	Purpose of Disbursement SALARY				2500.00 Refund or Disposal of Excess			
	Candidate Name	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)			SALARY			
	State: District:							
s	UBTOTAL of Disbursements This Page (optional			>	4538.05			

SCHEDULE B (FEC Form 3)			Llos concrete cohertula/a\		FOR LINE NUMBER:				F	PAGE 98 / 105		
ITEMIZED DISBURSEMENTS		for each	Use seperate schedule(s) for each category of the		(check onl	y one)			•			
		Detailed	Summary Page		}	X 17 20a	,	18 20	L	19a 20d		19b 21
	y Information copied from such Reports and State					for the	ourpo	se c	of so	licating	contr	ibutions
or	for commercial purposes, other than using the nan	ne and addre	ess of any political	con	nmittee to so	olicit co	ntribu	tions	s fro	m such	com	mittee
\setminus	NAME OF COMMITTEE (In Full)											
V	Graves for Congress											
Α.	Full Name (Last, First, Middle Initial)						Transaction ID: 60421.E2183 Date of Disbursement					
Α.	Automatic Data Processing, Inc.						e of L)isbi /	urse	ment	V	/ · V · V
	Mailing Address 400 W. Covina Blvd.						12 14 2005					
	City San Dimas	State CA	Zip Code 91773-			Am	ount	of Ea	ach	Disburs	emer	nt this Period
	Purpose of Disbursement PROCESSING FEE							31.00				
	Candidate Name				ategory/					sposal c Requir		
	Gardidate Name				Type		11 C					
		ement For:				PRO	OCE	SSI	NG	FEE		
	Senate President	Other (sp	General									
	State: District:	Other (3p	CCIIy) \									
_	Full Name (Last, First, Middle Initial)						Transaction ID: 60421.E2180 Date of Disbursement 111					
В.	Automatic Data Processing, Inc.											
	Mailing Address 400 W. Covina Blvd.											
	City	State	Zip Code			Am	ount (of Ea	ach	Disburs	emer	nt this Period
	San Dimas CA 91773- Purpose of Disbursement											72.46
	PROCESSING FEE					Refund or Disposal of Excess			ess			
	Candidate Name	С	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53				nder				
		ement For:				PRO	OCE	SSI	NG	FEE		
	Senate President	Other (sp	General									
	State: District:	_ Other (sp	ecity) 🔻									
	Full Name (Last, First, Middle Initial)						Transaction ID: 60421.C6569IK					
C.	National Republican Congressional Commit					Date of Disbursement						
	Mailing Address 320 First Street, S.E.						$ \begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \begin{bmatrix} D & 1 & 4 \end{bmatrix} \begin{bmatrix} Y & Y & 0 & 0 & 5 \end{bmatrix} $					
	City	State	Zip Code			Am	ount (of Ea	ach	Disburs	emer	nt this Period
	Washington	DC	20003-						_		-	00.00
	Purpose of Disbursement FAX SENT ON BEHALF OF CANDIDAT						Defin	ad a	. Di	annool o	f Eve	98.00
	Candidate Name		ategory/ Type			ibut	ions	sposal o Requir 0.53				
	Office Sought: House Disburs	ement For:			71 ·	עואור	/	\ V (SENIT	י וא	ВЕНА-	
	Senate	Primary	General			LF (OF C	AN	ĎìĊ	DAT	אור ד	J⊏I I⁄-\-
	President State: District:	Other (sp	ecity)									
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s	UBTOTAL of Disbursements This Page (optional)											201.46
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	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	_	NUMBER: PAGE 99 / 105
IT	EMIZED DISBURSEMENTS	for each category of the	(check only	√ 17
		Detailed Summary Page		20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
Ν	NAME OF COMMITTEE (In Full)			
/	Graves for Congress			
<u></u>	Full Name (Last, First, Middle Initial)			Transaction ID: 60421.E2196
A.	Michael Britt			Date of Disbursement
	Moiling Address Of 4.0. Occurring According			12 29 2005
	Mailing Address 314 S. Carolina Ave, SE			12 23 2003
		State Zip Code		Amount of Each Disbursement this Period
	Washington	DC 20003-		6000.00
	Purpose of Disbursement SALARY			Refund or Disposal of Excess
	Candidate Name		Category/	Contributions Required Under
			Туре	11 C.F.R. 400.53
	Office Sought: House Disburse Senate	ement For: Primary General		SALARY
	President	Other (specify)		
	State: District:			
Б	Full Name (Last, First, Middle Initial)	Transaction ID: 60421.E2197		
В.	Michael Britt			Date of Disbursement
	Mailing Address 314 S. Carolina Ave, SE	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
		State Zip Code		Amount of Each Disbursement this Period
	Washington	DC 20003-		6000.00
	Purpose of Disbursement SALARY		Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		SALARY
	Senate	Primary General		O/LD/IITI
	President State: District:	Other (specify)		
	Full Name (Last, First, Middle Initial)			Transaction ID: 60421.E2161
C.	Lathrop & Gage, LLC.			Date of Disbursement
	Mailing Address 2345 Grand Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 5 \end{bmatrix}^{Y}$
	City Kansas City	State Zip Code MO 64108-2684		Amount of Each Disbursement this Period
	Purpose of Disbursement	57.98		
	POSTAGE LONG-DISTANCE COPIES Candidate Name	O a ta marm /	Refund or Disposal of Excess Contributions Required Under	
	Candidate Name		Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		POSTAGE LONG-DISTANCE COP-
	Senate	Primary General		IES
	State: President State:	Other (specify)		
Г	District.			
s	UBTOTAL of Disbursements This Page (optional)		>	12057.98

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 100 / 105
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on	X 17
	y Information copied from such Reports and for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			
\backslash	Graves for Congress			
Α.	Full Name (Last, First, Middle Initial) Automatic Data Processing, Inc.	Transaction ID: 60421.E2185 Date of Disbursement		
	Mailing Address 400 W. Covina Blvd	111		
	City San Dimas	State Zip Code CA 91773-		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL EXPENSE			562.56 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	sbursement For: Primary General Other (specify)		PAYROLL EXPENSE
_	State: District:			
В.	Full Name (Last, First, Middle Initial) The Salvation Army	Transaction ID: 60421.E2164 Date of Disbursement		
	Mailing Address 4300 N.E. Parvin R	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City Kansas City	State Zip Code MO 64117-		Amount of Each Disbursement this Period
	Purpose of Disbursement CHARITABLE DONATION	1000.00		
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Di Senate President	sbursement For: Primary General Other (specify)		CHARITABLE DONATION
	State: District:			
C.	Full Name (Last, First, Middle Initial) UMB Visa			Transaction ID: 60421.E2032 Date of Disbursement
	Mailing Address 1010 Grand Blvd.			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Kansas City	State Zip Code MO 64106-		Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD: SEE BELOW	• •	274.51 Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Di Senate President	sbursement For: Primary General Other (specify)		CREDIT CARD: SEE BELOW
_	State: District:			
s	UBTOTAL of Disbursements This Page (opt	ional)	>	1837.07

91	CHEDIII E B /EEC Form 2	`				
SCHEDULE B (FEC Form 3		-	Use seperate scriedule(s)			NUMBER: PAGE 101 / 105 y one)
Ш	EMIZED DISBURSEMENT	ıs		category of the Summary Page	_ ` <u>-</u> -	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports a for commercial purposes, other than usin					or the purpose of solicating contributions licit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Graves for Congress					
Α.	Full Name (Last, First, Middle Initial)					Transaction ID: 60421.E2034
Λ.	Oceanaire Seafood Room					Date of Disbursement
	Mailing Address 1201 F Street, N	IW				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & 5 \\ D & O & O & 5 \end{smallmatrix} \end{bmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Washington Purpose of Disbursement	-	DC	20004-		245.81
	DONOR MEETING					Refund or Disposal of Excess
	Candidate Name				Category/	Contributions Required Under 11 C.F.R. 400.53
	Office Country House	Diahuman			Туре	[MEMO ITEM]
	Office Sought: House Senate	Disburse	Primary	General		MEMO: DONOR MEETING
	President		Other (spe			
	State: District:					
В.	Full Name (Last, First, Middle Initial) Nova Information Systems	Transaction ID: 60421.E2177 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Mailing Address 7300 Chapman					
	City		State TN	Zip Code 37920-		Amount of Each Disbursement this Period
	Knoxville Purpose of Disbursement	46.38				
	CREDIT CARD PROCESSING FEE		Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser		Cananal		CREDIT CARD PROCESSING FEE
	Senate President		Primary Other (spe	General		
	State: District:		- W. (- (-)-	···// •		
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60421.E2087
C.	UMB Visa	Date of Disbursement				
	Mailing Address 1010 Grand Blve	12 19 2005				
	City Kansas City		State MO	Zip Code 64106-		Amount of Each Disbursement this Period
	Purpose of Disbursement	<u>'</u>		04100		1811.30
	CREDIT CARD: SEE BELOW	Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House	Disburser				CREDIT CARD: SEE BELOW
	Senate President		Primary Other (spe	General		
	State: District:		Other (spe	,∪ıı y) ▼		
Q	UBTOTAL of Disbursements This Page	(ontional)				1857.68

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	CHEDULE B (FEC Form 3)	Use seperate schedule(NE NUMBER: PAGE 102 / 105 only one)	
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page	`	X 17	
An	y Information copied from such Reports and Statem	lents may not be sold or us	ed by any perso		
or	for commercial purposes, other than using the name	e and address of any politic	al committee to	o solicit contributions from such committee	
\rangle	NAME OF COMMITTEE (In Full) Graves for Congress				
A.	Full Name (Last, First, Middle Initial) Berbiglia Wine & Spirit			Transaction ID: 60421.E2091 Date of Disbursement	
	Mailing Address 8300 N Church Road	12 M / D D / Y Y Y O Y S			
		State Zip Code MO 64158-		Amount of Each Disbursement this Period	
	Purpose of Disbursement REFRESHNENTS FOR CHRISTMAS PARTY			1419.64	
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President	ment For: Primary Genera Other (specify) ▼		MEMO: REFRESHNENTS FOR CHRISTMAS PARTY	
	State: District:	- 			
В.	Full Name (Last, First, Middle Initial) Capitol Hill Club			Transaction ID: 60421.E2090 Date of Disbursement	
	Mailing Address 300 1st Street, S.E.	1 1 1 1 1 5 / Y 2 0 0 5 Y			
	,	State Zip Code DC 20003-		Amount of Each Disbursement this Period	
	Purpose of Disbursement GIFT FOR CONSTITUENT	179.41 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Senate President	ment For: Primary Genera Other (specify)		MEMO: GIFT FOR CONSTITUENT	
	State: District:				
C.	Full Name (Last, First, Middle Initial) Dubliner Restaurant			Transaction ID: 60421.E2089 Date of Disbursement	
	Mailing Address 520 N Capitol St, NW			111 / 15 / 2005	
		State Zip Code DC 20001-		Amount of Each Disbursement this Period	
	Purpose of Disbursement ENTERTAIN CONSTITUENT	40.24			
	Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	MEMO: ENTERTAIN CONSTITU- ENT	
_	State: District:	- (-i)/ V			
s	UBTOTAL of Disbursements This Page (optional) .		I	0.00	

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 103 / 105 Use seperate schedule(s) (check only one) for each category of the 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Graves for Congress** Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2088 **Dubliner Restaurant** Date of Disbursement 15 2005 Mailing Address 520 N Capitol St, NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20001-29.25 Purpose of Disbursement **ENTERTAIN CONSTITUENT** Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] MEMO: ENTERTAIN CONSTITUE-Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60421.E2157 Southwestern Bell Telephone Company Date of Disbursement 0 1 2005 Mailing Address P.O. Box 940012 City State Zip Code Amount of Each Disbursement this Period Dallas 75394-TX 1412.72 Purpose of Disbursement OFFICE PHONE EXPENSE Refund or Disposal of Excess

Category/

Type

General

Contributions Required Under

OFFICE PHONE EXPENSE

11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	1412.72
TOTAL This Period (last page this line number only)	•	80135.69

Candidate Name

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

PAGE 104 / 105 SCHEDULE D (FEC Form 3) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) **Graves for Congress** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Boyles Motors, Inc. Vehicle Lease Mailing Address 204 N. Market Street ZIP Code City State Maryville MO 64468-Outstanding Balance Beginning This Period Transaction ID: 3LS60421.E42 500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Kwrt-am/kwrt-fm Radio Advertising Mailing Address 1600 Radio Hill Road ZIP Code City State Boonville MO 65233-Outstanding Balance Beginning This Period Transaction ID: 2LS60421.E45 857.65 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 857.65 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Willard Dowden Rent for Nodaway Co. Republican Com Mailing Address Route 1, Box 116 State ZIP Code City Burlington Junctio MO 64428-Outstanding Balance Beginning This Period Transaction ID: 4LS60421.E46 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 200.00 1557.65 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 105 / 105 SCHEDULE D (FEC Form 3) (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) **Graves for Congress** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Missouri Right to Life PAC Membership Labels Mailing Address P.O. Box 651 ZIP Code City State Jefferson City MO 65102-Outstanding Balance Beginning This Period Transaction ID: LS60421.E49 1087.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1087.00 0.00 1087.00 1) SUBTOTALS This Period This Page (optional).....

2644.65

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)